Edgar Filing: STATE STREET CORP - Form 4

STATE STR	EET CORP										
Form 4											
November 1'	7, 2016										
FORM	4		an au			~~~ .	NGEO		OMB AF	PROVAL	
) STATES	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 o	er STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 6. SECURITIES								Expires:January 3°200Estimated averageburden hours perresponse0.		
Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).											
(Print or Type F	Responses)										
			2. Issuer Name and Ticker or Trading Symbol STATE STREET CORP [STT]					5. Relationship of Reporting Person(s) to Issuer			
<i>•</i>								(Check all applicable)			
(Last) (First) (Middle) STATE STREET CORPORATION, ONE LINCOLN STREET			3. Date of Earliest Transaction (Month/Day/Year) 11/15/2016					Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
BOSTON, N	MA 02111							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		n Date, if	3. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	11/15/2016			Code V F	Amount 2,349 (1)	(D) D	Price \$ 79.25	(Instr. 3 and 4) 50,741	D		
Common Stock								1,657 <u>(2)</u>	Ι	401 (k) Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
Conway Jeff D STATE STREET CORPORATION ONE LINCOLN STREET BOSTON, MA 02111			Executive Vice President	
Signatures				
/s/ Shannon C. Stanley, Attorney-in-fact		11/17/2016		

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) These shares were withheld to satisfy tax withholding obligations in connection with the vesting of previously awarded deferred stock.

The reporting person indirectly beneficially owns the indicated shares of State Street common stock under State Street's 401(k) plan,(2) based on a plan statement dated as of October 31, 2016. The plan accounts for interest in units consisting of shares of State Street common stock and a small amount of cash. As a result, the number of underlying shares may fluctuate from time to time.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.