#### Edgar Filing: Severyn Carol Jean - Form 4

Severyn Car Form 4	ol Jean										
February 19	, 2019										
	ПЛ								OMB AF	PROVAL	
				CURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287	
Check this box if no longer subject to <b>STATEMENT O</b>			CHANGES IN BENEFICIAL OWNERSHIP						Expires: Estimated a	January 31, 2005 verage	
Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Section 16. 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 1940								burden hour response			
(Print or Type	Responses)										
Severyn Carol Jean Symb CUL			Symbol	Issuer Name <b>and</b> Ticker or Trading ıbol				5. Relationship of Reporting Person(s) to Issuer			
			CULLEN/FROST BANKERS, INC. [CFR]					(Check all applicable)			
(Last) 100 WEST	(First) (Press) (First) (First) (Press) (First) (First	Middle) EET		f Earliest Tr Day/Year) 019	ansaction			Director X Officer (give below)		Owner r (specify	
	(Street)			endment, Da	te Origina	1		<ol> <li>6. Individual or Joi</li> </ol>			
SAN ANTO	DNIO, TX 78205			nth/Day/Year	-	1		Applicable Line) _X_ Form filed by O Form filed by Mo Person	ne Reporting Per	rson	
(City)	(State)	(Zip)	Tab	le I - Non-D	<b>)</b> erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	ned 1 Date, if	3. Transactio Code (Instr. 8)	4. Securi	ties Ad sposed	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common				Code V	Amount		Price	(Instr. 3 and 4)			
Stock, \$0.01 par value	02/14/2019			М	1,250	А	\$ 50.64	1,250	D		
Common Stock, \$0.01 par value	02/14/2019			М	2,500	A	\$ 52.46	3,750	D		
Common Stock, \$0.01 par value	02/14/2019			S	3,750	D	\$ 100.62 (1)	0	D		

Common			Through
Stock, \$0.01 par	7,672	Ι	401(k) Plan
value			1 Juli

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

# 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. Transactic Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ive Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 50.64	02/14/2019		М	1,250	10/20/2013	10/20/2019	Common Stock	1,250
Employee Stock Option (right to buy)	\$ 52.46	02/14/2019		М	2,500	10/26/2014	10/26/2020	Common Stock	2,500

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Severyn Carol Jean 100 WEST HOUSTON STREET SAN ANTONIO, TX 78205			GEVP and Chief Risk Officer				

## Signatures

/s/ Carol J. Severyn

02/19/2019

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).

The price in Column 4 is based on a weighted average price. The prices actually paid range from \$100.61 to \$100.64. The reporting
 (1) person will provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range.

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.