## Edgar Filing: MATHEW SARA - Form 4

| MATHEW S                       | ARA                        |            |                 |   |            |   |        |         |  |                      |                         |  |
|--------------------------------|----------------------------|------------|-----------------|---|------------|---|--------|---------|--|----------------------|-------------------------|--|
| Form 4                         |                            |            |                 |   |            |   |        |         |  |                      |                         |  |
| April 02, 201                  | 8                          |            |                 |   |            |   |        |         |  |                      |                         |  |
| FORM                           | 4                          |            |                 |   |            |   |        |         |  |                      | PPROVAL                 |  |
|                                | UTTE                       | D STAT     |                 |   |            | ND EXC<br>D.C. 205                      |        | NGE (   | COMMISSION   | OMB<br>Number:       | 3235-0287               |  |
| Check this box<br>if no longer |                            |            |                 |   |            |   |        |         |  | Expires:             | January 31,<br>2005     |  |
| subject to                     | NIA I H                    | CMENT      | <b>COF CHAN</b> | CHANGES IN BENEFICIAL OWN                             |            |   |        |         |  | Estimated            |                         |  |
| Section 16.                    |                            |            |                 | SECURITIES  |            |   |        |         |  | burden hou           | burden hours per        |  |
| Form 4 or<br>Form 5            |                            | ursuant    | to Section 10   | 5(a) of   | the        | Securiti                                | es Fr  | cchanc  | ge Act of 1934,  | response             | 0.5                     |  |
| obligation                     | <sup>18</sup> Section $1'$ |            |                 |   |            |   |        |         | of 1935 or Sectio  | n                    |                         |  |
| may conti<br><i>See</i> Instru | nue.                       |            | (h) of the In   | •   |            | •                                       | - ·    |         |  |                      |                         |  |
| 1(b).                          | letion                     |            |                 |   |            |   |        |         |  |                      |                         |  |
|                                |                            |            |                 |   |            |   |        |         |  |                      |                         |  |
| (Print or Type R               | lesponses)                 |            |                 |   |            |   |        |         |  |                      |                         |  |
| 1. Name and A                  | ddress of Reportir         | g Person   | * 2 Issuer      | Name a  | nd '       | Ticker or '                             | Fradin | σ       | 5. Relationship of   | Reporting Per        | son(s) to               |  |
|                                |                            |            |                 | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol |            |   |        |         | Issuer   |                      |                         |  |
|                                |                            |            | STATE           | STRE  | ET         | CORP [                                  | STT]   |         |  |                      | 、<br>、                  |  |
| (Last) (First) (Middle) 3      |                            |            | 3. Date of      | 3. Date of Earliest Transaction                       |            |   |        |         | (Check all applicable)                                     |                      |                         |  |
|                                |                            |            |                 | onth/Day/Year)  |            |   |        |         | XDirector10% Owner   |                      |                         |  |
|                                |                            |            |                 | 03/29/2018  |            |   |        |         | Officer (give title Other (specify below) below)           |                      |                         |  |
|                                | ΓΙΟΝ, ΟΝΕ LI               | NCOLI      | N               |   |            |   |        |         | below)   | below)               |                         |  |
| STREET                         |                            |            |                 |   |            |   |        |         |  |                      |                         |  |
|                                |                            |            |                 | mendment, Date Original                               |            |   |        |         | 6. Individual or Joint/Group Filing(Check                  |                      |                         |  |
|                                |                            |            | Filed(Mon       | ed(Month/Day/Year)                                    |            |   |        |         | Applicable Line)<br>_X_ Form filed by One Reporting Person |                      |                         |  |
| BOSTON, M                      | IA 02111                   |            |                 |   |            |   |        |         | Form filed by N<br>Person                                  |                      |                         |  |
| (City)                         | (State)                    | (Zip)      | Table           | e I - Noi   | n-De       | erivative S                             | Securi | ties Ac | quired, Disposed of  | f, or Beneficia      | lly Owned               |  |
| 1.Title of                     | 2. Transaction D           | Date 2A.   | Deemed          | 3.  |            | 4. Securi                               |        |         | 5. Amount of   | 6. Ownership         |                         |  |
| Security                       | (Month/Day/Ye              |            | cution Date, if | TransactionAcquired (A) or                            |            |   |        |         |  | Form: Direct         | Indirect                |  |
| (Instr. 3)                     |                            | any<br>(Mo | onth/Day/Year)  | Code<br>(Instr.                                       | • · ·      |   |        |         | Beneficially<br>Owned                                      | D) or<br>ndirect (I) | Beneficial<br>Ownership |  |
|                                |                            | ,          |                 |   | ĺ          | . , , , , , , , , , , , , , , , , , , , |        |         | Following  | (Instr. 4)           | (Instr. 4)              |  |
|                                |                            |            |                 |   |            |   | (A)    |         | Reported<br>Transaction(s)                                 |                      |                         |  |
|                                |                            |            |                 | Cal   | <b>N</b> 7 | A                                       | or     | Deter   | (Instr. 3 and 4)   |                      |                         |  |
| Common                         |                            |            |                 |   | v          | Amount                                  |        | Price   |  |                      |                         |  |
| Stock                          | 03/29/2018                 |            |                 | А   |            | 126 <u>(1)</u>                          | А      | \$0     | 126  | D                    |                         |  |

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)

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

## **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
| 1   | Director      | 10% Owner | Officer | Other |  |  |  |
| MATHEW SARA<br>C/O STATE STREET CORPORATION<br>ONE LINCOLN STREET<br>BOSTON, MA 02111 | Х             |           |         |       |  |  |  |
| Signatures  |               |           |         |       |  |  |  |
| /s/ Shannon C. Stanley,<br>Attorney-in-fact   | 04/02/2018    |           |         |       |  |  |  |
| **Signature of Reporting Person   | Da            | ite       |         |       |  |  |  |
|   |               |           |         |       |  |  |  |

## **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) Payment of prorated Director's stock award.

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.