MATHEW SARA Form 3 April 02, 2018 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Ad Person <u>*</u> MATHEW		orting	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol STATE STREET CORP [STT]					
(Last)	(First)	(Middle)	03/29/2018	4. Relationship Person(s) to Is		5. If Amendment, Date Original Filed(Month/Day/Year)			
C/O STATE STREET CORPORATION, ONE LINCOLN STREET (Street)			(Check all applicable) <u>X</u> Director 10% Owner Officer Other (give title below) (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting			
BOSTON, I	MAÂ 0211	11				Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - N	Non-Derivati	ve Securiti	es Beneficially Owned			
1.Title of Securi (Instr. 4)	ty		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Reminder: Repor owned directly o	r indirectly. Persor inform require	ns who resp ation conta ed to respo	ch class of securities benefici cond to the collection of hined in this form are not nd unless the form displ MB control number.		EC 1473 (7-02))			
Та	ble II - Deri	ivative Secur	rities Beneficially Owned (e.	.g., puts, calls,	warrants, opt	ions, convertible securities)			

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Shares

or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MATHEW SARA C/O STATE STREET CORPORATION ONE LINCOLN STREET BOSTON, MA 02111	ÂX	Â	Â	Â			
Signatures							
/s/ Shannon C. Stanley, Attorney-in-fact	04/02/	2018					
**Signature of Reporting Person	Dat	te					
Explanation of Responses:							

No securities are beneficially owned

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

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.