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STATE STRI	EET CORP											
Form 4												
May 01, 2008	3											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	• UNITE	D STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this		0 /			Expires:	January 31,						
if no longer subject to Section 16. STATEMENT OF CHA				IANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per			
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5		
obligation	~ ^							ge Act of 1934, If 1935 or Sectio				
may conti	nue.		of the Inv	•	•	- ·			011			
See Instruction 1(b).	ction	50(II)	of the m	vestment	compan	y 1101	0117	-10				
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> SKATES RONALD L			2. Issuer Name and Ticker or Trading Symbol				g	5. Relationship of Reporting Person(s) to Issuer				
				STATE STREET CORP [STT]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			(Cnec	ck all applicable	e)		
				Day/Year)				_X_ Director10% Owner				
			04/30/20	04/30/2008				Difficer (give title Other (specify below) below)				
	TION, ONE L	INCOLN						below)	below)			
STREET												
	(Street)		4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mo			Filed(Mon	Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
BOSTON, M	IA 02111							Form filed by M Form filed by M Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	3. 4. Securities				5. Amount of	6. Ownership 7	7. Nature of				
Security	(Month/Day/Year) Execution Date, if any			TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)				Securities	Form: Direct	Indirect		
(Instr. 3)		Beneficially Owned	Indirect (I) Owne					Beneficial Ownership				
				/Day/Year) (Instr. 8) (Instr. 3, 4			F		Following	(Instr. 4)		
						(A)		Reported Transaction(s)				
				<i>a</i>		or		(Instr. 3 and 4)				
Common				Code V		(D)	Price	,				
Stock	04/30/2008			А	2,701 (1)	А	\$0	22,814 <u>(2)</u>	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
reprinting of their claime (crain of	Director	10% Owner	Officer	Other			
SKATES RONALD L C/O STATE STREET CORPORATION ONE LINCOLN STREET BOSTON, MA 02111	Х						
Signatures							
/s/ Richard P. Jacobson, Attorney-in-fact	05/0	1/2008					
**Signature of Reporting Person	D	ate					

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 Director's stock award and retainer(s).
- (2) Includes Director's stock compensation dividend equivalents and shares acquired due to dividend reinvestment through the date of this report.

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.