#### MOXLEY JAMES R III

\$2.50 par 10/16/2017

value common

stock

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Form 5

February 14, 2018

February 1	4, 2018									
FOR	M 5							OMB APPI	ROVAL	
_	UNITE	D STATES SE				COM	MISSION	OMB Number:	3235-0362	
	this box if er subject		Washington, D.C. 20549 CATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: J	anuary 31, 2005	
5 obliga may co	or Form AN ations ntinue.							Estimated ave burden hours   response	rage	
See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported Form 4 Transactions Reported Reported										
	Address of Reporting JAMES R III	Sym FUI	Symbol Is FULTON FINANCIAL CORP				Relationship of Reporting Person(s) to uer (Check all applicable)			
(Last) (First) (Middle)			[FULT] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017				Director 10% Owner Officer (give title Other (specify ow) below)			
C/O FULTON FINANCIAL CORPORATION, P.O. BOX 4887, ONE PENN SQUARE										
Filed(Month/Day/Year)							int/Group Reporting			
(спеск аррисале ппе)										
LANCAS	TER, PA 176	04					orm Filed by Mo	ne Reporting Personer than One Repo		
(City)	(State)	(Zip)	Table I - Non-I	Derivative Sec	urities A	cquired,	Disposed of,	or Beneficially (	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	Code	4. Securities Acquired (A Disposed of (D) (Instr. 3, 4 and 5)  (A) or		d (A) or	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4	Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
\$2.50 par value common stock	10/16/2017	Â	J	Amount 135.8103 (1)	(D) A \$	Price [5]	49,264.753		Â	

1.8299 (1) A

19.099

16,006.5122 I

By

for

Custodial

Accounts

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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.								SEC 2270 (9-02)	
\$2.50 par value common stock	Â	Â	Â	Â	Â	Â	39,115	I	By Moxley Family Trust
\$2.50 par value common stock	Â	Â	Â	Â	Â	Â	20,000	I	By 401(k)
\$2.50 par value common stock	12/18/2017	Â	J	1.7313 <u>(1)</u>	A	\$ 18.125	1,069.8706	I	Spouse
\$2.50 par value common stock	12/18/2017	Â	J	25.9662 (1)	A	\$ 18.125	16,032.9993	I	By Custodial Accounts for Children
\$2.50 par value common stock	12/18/2017	Â	J	39.9994 (1)	A	\$ 18.125	49,343.444	D	Â
\$2.50 par value common stock	12/15/2017	Â	J	0.359 (1)	A	\$ 18.389	1,068.1393	I	Spouse
\$2.50 par value common stock	12/15/2017	Â	J	0.5209 (1)	A	\$ 18.389	16,007.0331	I	By Custodial Accounts for Children
\$2.50 par value common stock	12/15/2017	Â	J	38.6911 (1)	A	\$ 18.389	49,303.4446	D	Â
\$2.50 par value common stock	10/16/2017	Â	J	0.1257 (1)	A	\$ 19.099	1,067.7803	I	Children Spouse
									Children

 $\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (\emph{e.g.}, puts, calls, warrants, options, convertible securities) \\ \end{tabular}$ 

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
									or	
						Date	Expiration		Number	
						Exercisable	ercisable Date		of	
					(A) (D)				Shares	

of D

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
MOXLEY JAMES R III C/O FULTON FINANCIAL CORPORATION P.O. BOX 4887, ONE PENN SQUARE LANCASTER, PA 17604	Â	Â	Â	Â		

# **Signatures**

John R. Merva, Attorney-in-Fact 02/14/2018

\*\*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) Dividend Reinvestment of shares.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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