Snyder Angela M Form 3 January 10, 2018

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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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 Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement FULTON FINANCIAL CORP [FULT] Snyder Angela M (Month/Day/Year) 01/01/2018 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O FULTON FINANCIAL (Check all applicable) CORPORATION, Â P.O. BOX 4887, ONE PENN SQUARE 10% Owner Director Officer (Street) Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) Sr Executive Vice President _X_ Form filed by One Reporting Person LANCASTER, PAÂ 17602 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security 2. Amount of Securities 3. 4. Nature of Indirect Beneficial Ownership Beneficially Owned (Instr. 4) Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Â \$2.50 par value common stock 4,642.6576 D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

(Instr. 4) Price of Derivative Security Derivative Security Derivative Security:	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)			6. Nature of Indired Beneficial Owners (Instr. 5)
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Date Expiration Title Amount or Security
Exercisable Date Number of
Shares

(I) (Instr. 5)

Direct (D)

or Indirect

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Snyder Angela M

C/O FULTON FINANCIAL CORPORATION P.O. BOX 4887, ONE PENN SQUARE
LANCASTER, PAÂ 17602

Relationships

Other

Signatures

John R. Merva on behalf of Snyder, Angela M. 01/10/2018

**Signature of Reporting Person Date

Explanation of Responses:

- * 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.

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