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CULLEN/FROST BANKERS, INC. Form 4 OMB >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>									
(Print or Type Re	esponses)								
1. Name and Add Perotti Willia	dress of Reporting Person <u>*</u> m L	2. Issuer Name and Ticker Symbol CULLEN/FROST BAN [CFR]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 100 WEST H	(First) (Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/23/2016	-			Director 10% Owner X Officer (give title Other (specify below) below) GEVP and Chief Risk Officer			
SAN ANTON	(Street) NIO, TX 78205	4. If Amendment, Date Origi Filed(Month/Day/Year)	nal	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(State) (Zip)	Table I - Non-Derivativ				-			
	2. Transaction Date 2A. De (Month/Day/Year) Execut any (Month	ion Date, if Transaction(A) or	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Stock	10/23/2016	F 858	D ^{\$} 74.88	79,300	D				
Common Stock, \$0.01 par value				37,077	I	Through 401(k) Plan			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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. Transactic Code (Instr. 8)	TransactionNumber Exp Code of (Mo		6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Perotti William L 100 WEST HOUSTON STREET SAN ANTONIO, TX 78205			GEVP and Chief Risk Officer				
Signatures							

/s/ William L. 10/25/2016 Perotti **Signature of Date

Reporting Person

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).

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.