## Edgar Filing: Lopez-Lay Ginoris - Form 4

Lopez-Lay Ginoris         Form 4         March 02, 2018         FORM 4         UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549         Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES       OMB APPROVAL         Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, sol(h) of the Investment Company Act of 1935 or Section 1(b).       State of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940)													
(Print or Type R	-												
Lopez-Lay Ginoris Symbol			Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer						
(Last)				BANCORP /PR/ [FBP] Earliest Transaction				(Check all applicable)					
			(Month/Da 02/28/20	/Day/Year) /2018				Director X Officer (give below)	XOfficer (give titleOther (specify				
Filed(Mon				ndment, Date Original th/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
(City) (Staty) (Tiy)													
	· · · · · · · · · · · · · · · · · · ·			e I - Non-D 3.				uired, Disposed of	f, or Beneficial 6. Ownership	-			
Security (Instr. 3)	(Instr. 3) any			3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)					
First BanCorp Common Stock, par value \$0.10 per share.	02/28/2018			А	1,594 (1)	A	\$ 6.03 (1)	151,175	D				
First BanCorp Common Stock, par value \$0.10 per share.	02/28/2018			F	501 <u>(1)</u>	D	\$ 6.03 (1)	150,674	D				

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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.

## 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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo
				Disposed						Trans
				of (D)						(Instr
				(Instr. 3, 4, and 5)						
				.,				A		
					Date Exercisable	Expiration Date	Title	Amount or Number of		
			Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Addr	·ess	Relationships							
	Director	10% Owner	Officer	Other					
Lopez-Lay Ginoris P.O. BOX 9146 SAN JUAN, PR 00908-014	.6		EVP						
Signatures									
/s/Ginoris Lopez-Lay	03/02/2018								

**Explanation of Responses:** 

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Salary stock issued bi-weekly as a portion of the reporting person's salary compensation under the First BanCorp Omnibus Incentive Plan,
 as amended. Salary stock is fully vested on the date of grant. The number of shares represented by this award was determined by dividing the dollar value of the award granted to the reporting person by \$6.03 (the closing price of the Issuer's common stock as quoted on the

NYSE on February 28, 2018, the last trading day of the pay period). The shares reported as disposed of were withheld for taxes.

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.

<u>\*\*</u>Signature of Reporting Person