

NUGENT CHARLES J
 Form 4
 May 03, 2012

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL
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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

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 Person *
 NUGENT CHARLES J

2. Issuer Name and Ticker or Trading Symbol
 FULTON FINANCIAL CORP
 [FULT]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)
 ___ Director ___ 10% Owner
 Officer (give title below) ___ Other (specify below)
 Sr. Executive Vice President

(Last) (First) (Middle)
 C/O FULTON FINANCIAL CORPORATION, P.O. BOX 4887,
 ONE PENN SQUARE
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 04/17/2012

LANCASTER, PA 17604
 (City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 ___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
\$2.50 par value common stock	04/17/2012		J	V	7.6496 ⁽¹⁾	A	\$ 10.3477
							178,927.2109 ⁽²⁾
\$2.50 par value common stock	04/18/2012		J	V	194.6614 ⁽¹⁾	A	\$ 10.2873
							179,121.8723 ⁽³⁾
\$2.50 par value	04/18/2012		J	V	18.8256 ⁽¹⁾	A	\$ 10.295
							179,140.6979 ⁽³⁾

common
stock

\$2.50 par
value
common
stock

04/18/2012

J V 556.0632 A \$ 0 179,696.7611 D
(4) (3)

\$2.50 par
value
common
stock

54,728 I Spouse

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 1474 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned (Instr. 6)
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Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

NUGENT CHARLES J
C/O FULTON FINANCIAL CORPORATION
P.O. BOX 4887, ONE PENN SQUARE
LANCASTER, PA 17604

Sr. Executive Vice President

Signatures

Mark A. Crowe,
Attorney-in-Fact 05/03/2012

__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) Reinvestment of dividends.
- (2) Includes 30,179.5135 shares held in the Fulton Financial Corporation 401(k) Retirement Plan.
- (3) Includes 30,374.1749 shares held in the Fulton Financial Corporation 401(k) Retirement Plan.
- (4) Reinvestment of dividends on restricted shares pursuant to the terms of the 2004 Stock Option and Compensation Plan.

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.