## Edgar Filing: COMERICA INC /NEW/ - Form 4

COMERICA	INC /NEW/										
Form 4											
March 02, 20	017										
<b>FORM</b>	14					~			OMB AF	PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287	
Check the									Expires:	January 31	
if no long subject to		EMENT O	F CHAN	GES IN I	BENEF	<b>ICIA</b>	LOW	NERSHIP OF	Estimated a	2005 Verage	
Section 16. Form 4 or				SECURITIES					burden hours per response 0.		
Form 5 Filed pursuant to Section 1				6(a) of the	e Securit	ies E	xchange	e Act of 1934	response	0.0	
obligation	ns Section 1						U	1935 or Section	1		
may cont See Instru	inue.			vestment	•	· ·					
1(b).											
	<b>,</b>										
(Print or Type I	Responses)										
1. Name and Address of Reporting Person       2. Issuer Name and Ticker or Trading       5. Relations							5. Relationship of	Reporting Pers	on(s) to		
Buchanan John D Symbol				I Name and Ticker of Trading				Issuer			
•				RICA INC /NEW/ [CMA]				(Charle all any limble)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction	-	-	(Check	k all applicable	)	
1717 MAIN STREET MC 6404         03/01/20								Director 10% Owner			
				017				X_ Officer (give title Other (specify below) below)			
								· · · · · · · · · · · · · · · · · · ·	P & Secretary		
	(Street)		4. If Ame	ndment, Dat	e Origina	l		6. Individual or Jo	int/Group Filin	g(Check	
			Filed(Mor	th/Day/Year)				Applicable Line)			
								_X_ Form filed by C Form filed by M			
DALLAS, 7	IX 75201							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D			3.	4. Securi			5. Amount of	6. Ownership		
Security	(Month/Day/Year) Execution Dat							Securities	Form: Direct		
(Instr. 3)		any (Month/l	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned	(D) or Beneficial Indirect (I) Ownership	Ownership	
		× ·	<i>,</i>					Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or	р.	(Instr. 3 and 4)			
Common				Code V		(D)	Price \$				
Stock	03/01/2017			Μ	1,843	А	ф 32.97	20,523 <u>(1)</u>	D		
							¢,				
Common Stock	03/01/2017			F	1,247	D	ֆ 74.58	19,276 <u>(1)</u>	D		

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.

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## 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. Transacti Code (Instr. 8)	5. Number on f Derivativ 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Employee Stock Option (right to buy)	\$ 32.97	03/01/2017		М	1,843	01/26/2017 <u>(2)</u>	01/26/2026	Common Stock	1,843
Employee Stock Option (right to buy)	\$ 67.66					01/24/2018 <u>(2)</u>	01/24/2027	Common Stock	2,910

## **Reporting Owners**

Reporting Owner Name / Address		Rel	ationships		
	Director	10% Owner	Officer	Other	
Buchanan John DEVP & Secreta1717 MAIN STREET MC 6404EVP & SecretaDALLAS, TX 75201EVP & Secreta					
Signatures					
/s/ Jennifer S. Perry, on behalf of Attorney	03/0	)2/2017			
<u>**</u> Signatur	]	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) Includes shares acquired through employee stock plans as of March 1, 2017.

(2) The options vest in four equal annual installments (based on the original grant amount) beginning on the date indicated in this column.

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.