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FIRST BAN	CORP /PR/										
Form 4											
September 1	8, 2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549							OMB Number:	3235-0287			
Check the if no long	ar.								Expires:	January 31 2005	
subject to STATEMENT OF CHA Section 16. Form 4 or				SECUR	ITIES				Estimated average burden hours per response		
obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the	Public Ut		ing Com	ipany	Act of	e Act of 1934, f 1935 or Sectio 40	n		
(Print or Type F	Responses)										
Power Carlos Symbol				r Name and Ticker or Trading BANCORP /PR/ [FBP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (N	Middle)	3. Date of Earliest Transaction (Chec					x all applicable)			
P.O. BOX 9146 (Month/Da 09/16/20			-				Director 10% Owner X Officer (give title Other (specify below) below) EVP				
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
SAN JUAN	, PR 00908-0146							Form filed by M Person	Iore than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)		on Date, if	3.4. Securities Acquired Transaction(A) or Disposed of CodeCode(D)(Instr. 8)(Instr. 3, 4 and 5)			d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
First BanCorp Common Stock	09/16/2015			A	1,689 (1)	A	\$ 3.87 (1)	154,954	D		
First BanCorp Common Stock	09/16/2015			F	529 <u>(1)</u>	D	\$ 3.87 (1)	154,425	D		

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

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Power Carlos P.O. BOX 9146 SAN JUAN, PR 00908-0146			EVP				

Signatures

/s/Carlos Power 09/18/2015 <u>**</u>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).

Salary stock issued bi-weekly as a portion of the reporting person's salary compensation under the First BanCorp 2008 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 \$3.87(the closing price of the Issuer's common stock as quoted

on the NYSE on September 16, 2015, 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.