Edgar Filing: SUNTRUST BANKS INC - Form 4/A

SUNTRUST	BANKS INC												
Form 4/A													
December 22	, 2006												
FORM 4 UNITED STATES SECURITIES AND										OMB APPROVAL			
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box				8 /						Expires:	January 31,		
if no long subject to	STATE	EMENT O	F CHAN	GES IN BENEFICIAL OW					NERSHIP OF	Estimated	2005 Werage		
Section 16.				SECURITIES						burden hou			
Form 4 or										response 0.5			
Form 5 obligation									ge Act of 1934,				
may conti See Instru 1(b).	nue. Section 1		Public Ut) of the Inv	•		•	- ·		f 1935 or Sectio 40	on			
(Print or Type R	esponses)												
GARROTT THOMAS M S			Symbol	2. Issuer Name and Ticker or Trading Symbol SUNTRUST BANKS INC [STI]					5. Relationship of Reporting Person(s) to Issuer				
			3. Date of Earliest Transaction					1]	(Check all applicable)				
(Last)	(First)	(Middle)				insaction			X Director	100	6 Owner		
P.O. BOX 11227			(Month/Day/Year) 12/08/2006						Officer (give title Other (specify below)				
(Street)			4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check				
			Filed(Mon	Filed(Month/Day/Year)					Applicable Line)				
12/ MEMPHIS, TN 38111				2/12/2006					_X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Nor	1-De	erivative S	Securi	ties Aco	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executi any	emed on Date, if /Day/Year)	Code (Instr.	8)	4. Securi nAcquirec Disposec (Instr. 3, Amount	l (A) of l of (D 4 and (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)			
Common	10/00/2000						. ,		202 102 (2)	D			
Stock	12/08/2006			G	V	4,560	D	<u>(1)</u>	203,192 <u>(2)</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.

 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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3,	5	ate	7. Title and Amount of Underlying Securities (Instr. 3 and	Derivative Security (Instr. 5)	
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title Amo or Nun of Shar	nber	

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
GARROTT THOMAS M P.O. BOX 11227 MEMPHIS, TN 38111	Х							
Signatures	D							

Raymond D. Fortin, Attorney-in-Fact for Thomas M. Garrott

**Signature of Reporting Person

12/22/2006 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) This transaction is a gift.

This filing amends the original Form 4 filed on 12/12/06, to include 55,138 shares which were acquired by the reporting person as a result of a distribution of 401(k) plan shares on 8/11/06. On the original filing of 12/12/06, these shares were reported as being distributed out of

(2) of a distribution of 40 (k) plan shares on of 17/00. On the original rining of 12/12/00, these shares were reported as being distributed out of the 401(k) plan, but were inadvertently omitted from his direct ownership in Table 1, Line 1 of the Form 4. Also, these shares were omitted from the reporting person's last Form 4 filed on 12/20/06.

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.