STATE STREET CORP Form SC 13G/A February 13, 2013

SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

SCHEDULE 13G

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

(AMENDMENT NO. 3)*

State Street Corporation

(Name of Issuer)

Common Stock

(Title of Class of Securities)

857477103

(CUSIP Number)

12/31/2012

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

Х	Rule 13d-1(b)
0	Rule 13d-1(c)
0	Rule 13d-1(d)

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

Page 1 of 4 Pages

CUSIP NO. 857	477103	i			13G	Page 2 of 4 Pages
1.			NAME OF REF	PORTING PER	RSONS	
Massachusetts F	inancial	Services	Company ("MFS")			
2. (SEE INSTRUC			THE APPROPRIATE I	BOX IF A ME	MBER OF A GROUP	
a) o	(b)	0				
Not Applicable						
3.			SEC U	USE ONLY		
4.			CITIZENSHIP OR PL	ACE OF ORG	ANIZATION	
Delaware						
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:						
5.			SOLE VC	OTING POWE	R	
23,271,350 shares of common stock						
6.			SHARED V	OTING POW	ER	
None						
7.			SOLE DISPO	OSITIVE POW	VER	
27,707,655 shares of common stock						
8.			SHARED DIS	POSITIVE PC	OWER	
None						
9. AC	GGREG	ATE AM	OUNT BENEFICIALL	Y OWNED B	Y EACH REPORTING	G PERSON
27,707,655 share non-reporting en		mmon sto	ck, consisting of shares	beneficially o	wned by MFS and/or c	ertain other
10. CHECK IF T INSTRUCTI		GREGAT	TE AMOUNT IN ROW	(9) EXCLUD	ES CERTAIN SHARI	ES (SEE
Not Applicable						

11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0

Edgar Filing: STATE STREET CORP - Form SC 13G/A 6.0 12. TYPE OF REPORTING PERSON (SEE INSTRUCTIONS) IA

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Schedule	e 13G		Page 3 of 4 Pages				
ITEM 1:		(a)	NAME OF ISSUER:				
See Cove	er Page						
(b)	ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICES:						
	coln Street Massachusetts 02	2111					
ITEM 2:		(a)	NAME OF PERSON FILING:				
See Item	1 on page 2						
	(b)	ADDRESS OF PRINCI	PAL BUSINESS OFFICE OR, IF NONE, RESIDENCE:				
	tington Avenue MA 02199						
(c)	CITIZENSHIP	:					
See Item	4 on page 2						
(d)	TITLE OF CLA	ASS OF SECURITIES:					
See Cove	er Page						
(e)	CUSIP NUMBER:						
See Cove	er Page						
ITEM 3: Rule 13d	l-1(b)(1)(ii)(E)	The person filing	is an investment adviser in accordance with				
ITEM 4:			OWNERSHIP:				
(a)	AMOUNT BEN	NEFICIALLY OWNED:					
See Item	9 on page 2						
(b)	PERCENT OF	CLASS:					
See Item	11 on page 2						
	IBER OF SHAF LE AND SHARF		CH PERSON HAS VOTING AND DISPOSITIVE POWERS				

See Items 5-8 on page 2

ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

0

Not Applicable

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Schedule 13G Page 4 of 4 Pages ITEM 6: OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON: Not Applicable ITEM IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE 7: SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON: Not Applicable **ITEM 8:** IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP: Not Applicable NOTICE OF DISSOLUTION OF GROUP: ITEM 9: Not Applicable **CERTIFICATIONS: ITEM 10:**

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 13, 2013

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD Daniel W. Finegold Vice President and Assistant Secretary