Edgar Filing: CENTURYLINK, INC - Form 4

CENTURYI	LINK, INC								
Form 4									
February 23,	_								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL		
	UNITED STA		, D.C. 20549	INGE C		OMB Number:	3235-0287		
Check th		(using ton	,				January 31,		
if no long subject to		OF CHANGES IN	BENEFICIA	LOW	NERSHIP OF	Expires:	2005		
Section 1		SECURITIES					verage rs per		
Form 4 o							0.5		
Form 5 obligatio	n a k	to Section 16(a) of th		U					
may conf	inue. Section 17(a) of	he Public Utility Hol		•		n			
See Instruction	uction 3	(h) of the Investmen	t Company Ac	t of 194	Ю				
1(b).									
(Print or Type I	Responses)								
1. Name and A	d Ticker or Tradi	ng	5. Relationship of Reporting Person(s) to						
COLE DAV	/ID D	Symbol				Issuer			
		CENTURYLIN	CENTURYLINK, INC [CTL]			(Check all applicable)			
(Last)	(First) (Middle)	3. Date of Earliest T	ransaction		```		, 		
	UDVINIK NIC 100	(Month/Day/Year)	•				Owner (specify		
	URYLINK, INC., 100 LINK DRIVE	02/20/2016	2/20/2016			_X_ Officer (give title Other (specify below)			
CLIVIORI					EVP, Cont	roller & Ops Su	ipport		
	(Street)		4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
		Filed(Month/Day/Yea	r)		Applicable Line) _X_ Form filed by One Reporting Person				
MONROE,	LA 71203				Form filed by M	fore than One Re			
	LIT / 1205				Person				
(City)	(State) (Zip)	Table I - Non-	Derivative Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date 2A.		4. Securities A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security			ion(A) or Dispose		Securities	Form: Direct	Indirect Beneficial		
(Instr. 3)	any (Mo	Code nth/Day/Year) (Instr. 8)	(Instr. 3, 4 and	3)	Beneficially Owned	(D) or Indirect (I)			
	×	, , , , ,			Following	(Instr. 4)	(Instr. 4)		
			(A)		Reported Transaction(s)				
			or Amount (D)	Deire	(Instr. 3 and 4)				
Common			Amount (D)	Price \$					
Stock	02/20/2016	F <u>(1)</u>	1,761 D	ф 29.73	198,128 <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 o Derivati Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COLE DAVID D C/O CENTURYLINK, INC. 100 CENTURYLINK DRIVE MONROE, LA 71203			EVP, Controller & Ops Support				
Signatures							
/s/ Hope M. Spencer, Attorney-in-Fact for David D. Cole			02/23/2016				
<u>**</u> Signature of Reporting Per	rson		Date				
Explanation of Posponsos:							

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) Shares withheld to cover the taxes due upon the vesting of restricted stock.
- (2) Includes 10,002 shares held in the Issuer's ESPP for the benefit of the Reporting Person as of the date of this report.

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.