Edgar Filing: CARROLL MILTON - Form 4

Form 4											
February 21, FORM	4 UNITED	STATES		RITIES A shington,			NGE C	COMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check thi if no long subject to Section 14 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	er STATEM 6. Filed pur ¹⁸ Section 17(a	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 20(b) of the Investment Company Act of 1940							Lanuary 31, 2005Expires:2005Estimated average burden hours per response0.5		
(Print or Type R	Responses)										
CARROLL MILTON Symbol CENT			Symbol	er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/E 1111 LOUISIANA 02/19/2 (Street) 4. If Ame			3. Date of	nte of Earliest Transaction nth/Day/Year) 9/2018				X Director 10% Owner X Officer (give title Other (specify below) below) Executive Chairman			
			mendment, Date Original /lonth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
HOUSTON,	TX 77002							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/D	n Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3, Amount	(A) or	d of (D) 5) Price	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 Stock	02/19/2018			F	4,120 (1)	D	\$ 26.91	213,380 <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)

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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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (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				
CARROLL MILTON 1111 LOUISIANA HOUSTON, TX 77002	Х		Executive Chairman					
Signatures								
By Vincent A. Mercaldi, Attorney-in-Fact		02/21	1/2018					
**Signature of Reporting Person		Da	ate					
Explanation of Boononooou								

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 for taxes upon vesting of time-based restricted stock units.

Total includes (i) 29,825 time-based restricted stock units previously awarded under the Issuer's Long-term Incentive Plan ("LTIP") and vesting in February 2019, and (ii) 22,873 time-based restricted stock units previously awarded under the LTIP and vesting in February

(2) vising in reordary 2019, and (ii) 22,019, time-based restricted stock units previously awarded under the 2111 and vesting in reordary 2020. Each of the above awards shall vest if the Reporting Person continues to be an employee of Issuer from the grant date through the vesting date and on a pro-rata basis in the event of his earlier retirement, disability or death.

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.