TIME WARNER INC. Form SC 13G/A February 12, 2016

# 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. 1)*
	Time Warner Inc.
	(Name of Issuer)
	Common Stock
	(Title of Class of Securities)
	887317303
	(CUSIP Number)
	12/31/2015
(Da	ate of Event Which Requires Filing of this Statement)
1	mote the mule program to which this Cabadule is filed.

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

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

<sup>\*</sup>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).

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CUSIP NO. 887317303	13G	Page 2 of 4 Pages						
1.	NAME OF REPORTING PERSONS							
Massachusetts Financial Services Company ("MFS")								
2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS)								
a) o (b) o								
Not Applicable								
3.	SEC USE ONLY							
4. CITIZ	ZENSHIP OR PLACE OF ORGANIZAT	ION						
Delaware								
NUMBER OF SHARES BENEFICIAL	NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:							
5.	SOLE VOTING POWER							
37,578,232 shares of common stock								
6.	SHARED VOTING POWER							
None								
7.	SOLE DISPOSITIVE POWER							
44,899,374 shares of common stock								
8.	SHARED DISPOSITIVE POWER							
None								
9. AGGREGATE AMOUNT	Γ BENEFICIALLY OWNED BY EACH	REPORTING PERSON						
44,899,374 shares of common stock, co non-reporting entities.	onsisting of shares beneficially owned by I	MFS and/or certain other						
10. CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS)								
Not Applicable								
11 PERCENT OF	F CLASS REPRESENTED BY AMOUN	T IN ROW 9						

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ITEM 1	:	(a)	NAME OF ISSUER:			
See Cov	ver Page					
(b)	ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICES:					
	me Warner Cente ork, NY 10019	<b>ा</b>				
ITEM 2	<b>:</b> :	(a)	NAME OF PERSON FILING:			
See Iten	n 1 on page 2					
	(b)	ADDRESS OF PRINCIP	AL BUSINESS OFFICE OR, IF NONE, RESIDENCE:			
	ntington Avenue MA 02199					
(c)	CITIZENSHIF	<b>:</b>				
See Iten	m 4 on page 2					
(d)	TITLE OF CLASS OF SECURITIES:					
See Cov	ver Page					
(e)	CUSIP NUMBER:					
See Cov	ver Page					
ITEM 3 Rule 13	: d-1(b)(1)(ii)(E)	The person filing i	s an investment adviser in accordance with			
ITEM 4	:		OWNERSHIP:			
(a)	AMOUNT BE	NEFICIALLY OWNED:				
See Iten	m 9 on page 2					
(b)	PERCENT OF	CLASS:				
See Iten	m 11 on page 2					
	MBER OF SHAD		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:

o

Not Applicable

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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 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

ITEM 9: NOTICE OF DISSOLUTION OF GROUP:

Not Applicable

ITEM 10: CERTIFICATIONS:

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 12, 2016

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD

Daniel W. Finegold

Vice President and Assistant Secretary