Edgar Filing: Williamson Keith H - Form 4

Williamson I	Keith H										
Form 4											
December 18	3, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OWNEI					Expires:	January 31, 2005	
								NERSHIP OF	Estimated average		
Section 16.				SECURITIES					burden hours per		
Form 4 or Form 5	Form 4 or				C	с. т	1	A £ 1024	response	0.5	
obligation	no -						-	e Act of 1934, 1935 or Section			
may cont	inue.			vestment	•	· ·	•		I		
See Instru 1(b).	iction	50(II)	or the m	rvestment	Compa	1y 7 C		0			
	`										
(Print or Type F	(esponses)										
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person									on(s) to		
Williamson	Keith H		Symbol					Issuer			
CENTR				ENE CORP [CNC]				(Check all applicable)			
(Last)	(First) ((Middle)	3. Date o	f Earliest Tı	ransaction			(Cheer)	
(Month/D				nth/Day/Year) 5/2018				Director		Owner	
7700 FORSYTH BOULEVARD 12/15/2			X_ Officer (give title Other (specify below) below)								
								EVP, Secr.	& General Co	unsel	
			endment, Date Original				6. Individual or Joint/Group Filing(Check				
			Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
ST LOUIS	MO 62105							Form filed by O			
ST. LOUIS,	WIO 05105							Person			
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secur	rities Acqu	uired, Disposed of,	or Beneficial	y Owned	
1.Title of	2. Transaction Date	e 2A. Deen	•					5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)		n Date, if		on(A) or Disposed of (D) (Instr. 3, 4 and 5)			Securities Beneficially	Ownership	Indirect	
(Instr. 3)		any (Month/D	Day/Year)	Code (Instr. 8)	(mstr. 5,	4 and	3)	Owned	Form: Direct Beneficia (D) or Ownersh	Ownership	
		X						Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V		(D)	Price	(
Common Stock	12/15/2018			F	1,509 (1)	D	\$ 127.53	91,115 <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)	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)	;	Date	7. Title Amoun Underl Securit (Instr. 3	nt of ying	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 I	Amount or Number of Shares		

Edgar Filing: Williamson Keith H - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships							
, , , , , , , , , , , , , , , , , , ,	Director	10% Owner	Officer	Other				
Williamson Keith H 7700 FORSYTH BOULEVARD ST. LOUIS, MO 63105			EVP, Secr. & General Counsel					
Signatures								
/s/ Jeffrey A. Schwaneke (executed attorney-in-fact)	d by		12/18/2018					
<u>**</u> Signature of Reporting Pers	on		Date					
Evalenction of Deer								

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 previously reported stock grant.
- (2) Ownership includes 33,154 shares of restricted stock units subject to vesting requirements.

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.