Edgar Filing: CINCINNATI BELL INC - Form 4

CINCINNAT	ΓI BELL INC										
Form 4											
January 30, 2	2017										
FORM	14									PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check thi if no long									Expires:	January 31,	
subject to	STATE	EMENT O	F CHAN			CIA	LOW	NERSHIP OF	Estimated a	2005 average	
Section 16. SECURIT					ITIES			burden hours per			
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response 0.8		
obligation	• •						-	f 1935 or Section	n		
may cont	inue.		of the Inv	•	•	· ·			11		
See Instru 1(b).	iction	50(11)	of the m	vestment	compan	y 1101	. 01 1 /-	10			
1(0).											
(Print or Type F	Responses)										
	ddress of Reportin		2. Issuer	er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to				
WILSON CHRISTOPHER J			Symbol	-				Issuer			
			CINCIN	NATI BE	ELL INC	[CB	B]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			`	11	·	
			(Month/Day/Year)					Director	title 10% Owner Other (specify		
221 EAST F	OURTH STRE	EET	01/26/20)17				XOfficer (give below)	below)	er (specify	
								VP, C	General Counse	1	
			4. If Amer	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
			Filed(Mon	led(Month/Day/Year)							
CINICININA	TI OII 45202							_X_ Form filed by 0	1 0		
CINCINNA	TI, OH 45202							Person		1 0	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction D			3.				5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Yea	on Date, if Transaction(A) or Disposed of					Securities	Form: Direct (D) or	Indirect Beneficial		
(IIIsu. 3)		any (Month/	Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned	Indirect (I)	Ownership	
		× ×	, j		× ,		<i>,</i>	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price	(
Common Stock ⁽¹⁾	01/26/2017			А	4,333	А	\$ 22.5	27,393	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)

**Signature of

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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)	(Month/Day/Year) ive es ed ed		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy (2)	\$ 23.75					01/31/2014	01/30/2023	Common Stock	19,102	

Reporting Owners

Reporting Owner Name / Addr	ess	Relationships							
1 8	Director	10% Owner	Officer	Other					
WILSON CHRISTOPHER 221 EAST FOURTH STRE CINCINNATI, OH 45202			VP, General Counsel						
Signatures									
Christopher J. Wilson	01/30/2017								

Reporting Person Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Restricted Stock Units (RSUs) granted under the Cincinnati Bell Inc. 2007 Long Term Incentive Plan which is a Rule 16b-3 plan. The
 (1) RSUs vest on the third anniversary of the grant date. Each RSU constitutes the right to receive one share of Cincinnati Bell common stock upon vesting.

(2) Option shares granted under the Cincinnati Bell Inc. 2007 Long Term Incentive Plan which is a Rule 16b-3 plan.

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.