CENTURY BANCORP INC

Form 4 May 21, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005 Estimated average

Estimated average burden hours per response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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 30(h) of the Investment Company Act of 1940

1(b).

Common

(Print or Type Responses)

| WECTING ION | | | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | |
|---------------------|---------------------|-----------------------------|--|--------------|---------|--|---|-----------------|----------------------|
| | | CENTURY BANCORP INC [CNBKA] | | | | (Check all applicable) | | | |
| (Last) | | (Month/ | 3. Date of Earliest Transaction (Month/Day/Year) | | | | _X_ Director Officer (give below) | | Owner er (specify |
| 400 MYSTIC AVENUE 0 | | | 05/20/2015 | | | | | | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | |
| MEDFORD, MA 02155 | | | | | | Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) Tal | ole I - Non-D | erivative (| Securi | ties Acq | uired, Disposed of | , or Beneficial | ly Owned |
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securit | ies Ac | quired | 5. Amount of | 6. | 7. Nature of |
| Security | (Month/Day/Year) | Execution Date, if | Transactio | | | _ | Securities | Ownership | Indirect |
| (Instr. 3) | | any | Code | (Instr. 3, 4 | 4 and 5 | 5) | Beneficially | Form: Direct | Beneficial |
| | | (Month/Day/Year) | (Instr. 8) | | | | Owned | (D) or | Ownership |
| | | | | | | | Following | Indirect (I) | (Instr. 4) |
| | | | | | (A) | | Reported Transaction(s) | (Instr. 4) | |
| | | | | | or | | (Instr. 3 and 4) | | |
| G1 . | | | Code V | Amount | (D) | Price | ., | | |
| Class A | 05/20/2015 | | P | 53.298 | A | \$ 30.01 | 8,292.3588 | 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.

SEC 1474

(9-02)

39.01

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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | | | ate | 7. Title Amoun Under | int of lying ities | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene |
|---|---|---|---|---------------------------------------|-----------------------------------|---------------------|-----------------|----------------------------|--------------------------|--|---------------------------------|
| | Derivative Security | | | | Securities Acquired | | | (Instr. | 3 and 4) | | Owne Follo |
| | | | | | (A) or Disposed | | | | | | Repo Trans |
| | | | | | of (D) (Instr. 3, 4, and 5) | | | | | | (Instr |
| | | | | | 4, and 3) | | | | Amount | | |
| | | | | | | Date Exercisable | Expiration Date | Title | or Number of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------------|--|--|--|--|
| r g | Director | 10% Owner | Officer Other | | | | |
| WESTLING JON | | | | | | | |
| 400 MYSTIC AVENUE | X | | | | | | |
| MEDFORD, MA 02155 | | | | | | | |

Signatures

/s/ William P. Hornby, Attorney-In-Fact 05/21/2015

**Signature of Reporting Person Date

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).

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.

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