Form

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eft-width: 1; border-right-width: 1; border-bottom-width: 1">1.Title of Security

(Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)3. Transaction Code

(Instr. 8)4. Securities Acquired (A) or Disposed of (D)

(Instr. 3, 4 and 5)5. Amount of Securities Beneficially Owned Following Reported Transaction(s)

(Instr. 3 and 4)6. Ownership Form: Direct (D) or Indirect (I)

(Instr. 4)7. Nature of Indirect Beneficial Ownership

(Instr. 4)CodeVAmount(A) or (D)Price Common Stock08/14/2012 S 600 D \$ 42.67 20,364.4989 (1) D Common Stock08/14/2012 S 1,646 D \$ 42.73 18,718.4989 (1) D Common Stock 5,113.2712 I By 401(k) plan

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)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

 Title of 	2.	3. Transaction Date	3A. Deemed	4.		5.	6. Date Exerc	cisable and	7. Titl	e and	Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transa	ctio	nNumber	Expiration D	ate	Amou	nt of	Derivative	
Security	or Exercise		any	Code		of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Derivative	2		Secur	ities	(Instr. 5)	
	Derivative					Securities			(Instr.	3 and 4)		
	Security					Acquired						
	•					(A) or						
						Disposed						
						of (D)						
						(Instr. 3,						
						4, and 5)						
										Amount		
							Exercisable Date	Expiration	Title	or		
								Date				
				<i>a</i> .						of		
				Code	V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address		Kelationships	

Director 10% Owner Officer Other

Moreau Maxine L

C/O CENTURYLINK, INC. 100 CENTURYLINK DRIVE MONROE, LA 71203

SVP - Network Services

Signatures

/s/ Jennifer A. D'Alessandro, as attorney-in-fact 08/16/2012

**Signature of Reporting Person Date

Reporting Owners 1

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) Includes ESPP purchases through August 15, 2012.

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.