Edgar Filing: Invesco Ltd. - Form 4

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Invesco Ltd.												
Form 4												
February 02,	2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									т	APPROVAL		
		LD STATE		hington,			NGE (Number:	3235-0287		
Check this	s box		vv a5	migton,	D.C. 20.					January 31,		
if no longer STATEMENT OF CHAN				GES IN BENEFICIAL OWNE				NERSHIP OF	Expires:	2005		
subject to Section 16				SECURITIES					Estimated average burden hours per			
Form 4 or										response 0.5		
Form 5		-					-	ge Act of 1934,				
obligation may conti				•	•	• •		of 1935 or Section	on			
See Instru		30(h) of the Inv	vestment	Company	y Act	of 19	40				
1(b).												
(Print or Type R	(esponses)											
(The of Type I	(esponses)											
1. Name and Address of Reporting Person <u></u> 2. Issuer Name and Ticke					Ticker or T	Trading5. Relationship of Reporting Person(s) to						
HENRIKSO	N C ROBER	Т	Symbol	C				Issuer				
			Invesco	Ltd. [IVZ]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	f Earliest Transaction			(Check an applicable)					
(Month/Da			Day/Year)			X Director 10% Owner						
1555 PEACHTREE 01/29/20			016			Officer (give title Other (specify below) below)						
STREET, SUITE 1800									,			
(Street) 4. If Ame			ndment, Date Original			6. Individual or Joint/Group Filing(Check						
Filed(Mon				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
	CA 20200								More than One R			
ATLANTA,	GA 30309							Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction	Date 2A. De	emed 3. 4. Securities			5. Amount of	6. Ownership	7. Nature of				
Security	(Month/Day/Y		on Date, if TransactionAcquired (A) or			Securities	Form: Direct	Indirect				
(Instr. 3)		any (Month	h/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			•	(D) or Indirect (I)	Beneficial Ownership			
(Hondin Day Teal)				(1150.6) (1150.5, 4 and 5)				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D)	Price	(insures und 1)				
Comment												
Common Shares	01/29/2016			А	1,211	А	\$0	15,023	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)

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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. of Derivative Securities Acquired (A) or Disposed		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
HENRIKSON C ROBERT 1555 PEACHTREE STREET SUITE 1800 ATLANTA, GA 30309	Х						
Signatures							
/s/ Robert H. Rigsby, as Attorn in Fact	ey	02/02/2016					
**Signature of Reporting Person		Da	te				

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).

Remarks:

This Form 4 reports the acquisition by the reporting person of Common Shares resulting from a quarterly grant to the registrar

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.