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Gary Jesse E Form 4												
March 25, 24 FORN Check th if no long subject to Section 1 Form 4 co Form 5 obligation may com <i>See</i> Instr 1(b).	A 4 UNITED uis box ger o 16. or Filed pu Section 17	MENT O rsuant to (a) of the	Was F CHAN Section 1 Public U	shingt NGES SEC 6(a) o tility F	ion, IN I UR f the Hole	D.C. 2054 BENEFIC ITIES e Securitie	49 CIAL es Exco pany 2	OWN change Act of	OMMISSION NERSHIP OF Act of 1934, 1935 or Sectior 0	OMB Number: Expires: Estimated a burden hour response		
(Print or Type I	Responses)											
1. Name and Address of Reporting Person <u>*</u> Gary Jesse E			2. Issuer Name and Ticker or Trading Symbol CENTURY ALUMINUM CO [CENX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
COMPANY	^(First) URY ALUMINU Y, ONE SOUTH DRIVE, SUITE		3. Date of (Month/E 03/25/2	Day/Yea		ansaction			Director X Officer (give below) EVP, Gen.		Owner er (specify eretary	
	(Street)	Street) 4. If Amendment, Date C Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by C				int/Group Filing(Check Dne Reporting Person		
CHICAGO	, IL 60606								Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	le I - No	on-D	erivative Se	ecuriti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, if		3. Transa Code (Instr.	8)	4. Securitie n(A) or Disp (Instr. 3, 4 Amount	posed o	of (D)	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)		
Common Stock	01/28/2019			G	V	15,968 (1)	D	\$0	100,001 (2)	D		
Common Stock	01/28/2019			G	V	15,968 (1)	А	\$0	49,044 <u>(1)</u>	Ι	By Trust	
Common Stock	03/25/2019			А		105,256 (3)	А	\$0	205,257 <u>(2)</u>	D		
Common Stock	03/25/2019			F		46,624 (4)	D	\$ 8.23	158,633 <u>(2)</u>	D		

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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)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Gary Jesse E C/O CENTURY ALUMINUM COMPANY ONE SOUTH WACKER DRIVE, SUITE 1000 CHICAGO, IL 60606			EVP, Gen. Counsel & Secretary				
Signatures							

/s/ Jesse E. Gary **Signature of 03/25/2019 Date

Reporting Person

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) Represents shares transferred by the Reporting Person to a self-settled, revocable trust for estate planning purposes. The Reporting Person serves as the trustee of the trust.
- (2) Includes unvested performance share units granted to the Reporting Person pursuant to Issuer's 2017-2019, 2018-2020 and 2019-2021 Performance Share Programs under a Rule 16b-3(d) plan.
- (3) Represents shares of common stock acquired by the Reporting Person upon the vesting of performance share units granted in connection with the Issuer's 2016-2018 Long-Term Incentive Plan under Rule 16b-3(d).

(4)

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Reports shares withheld by the Issuer to satisfy tax obligations in connection with the vesting of performance share units granted to the Reporting Person.

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.