Form 5 February 07,	2019										
FORM	15							OMB AI	PPROVAL		
Check this no longer s	UNITED S	TATES SECUR Was	ITIES ANI hington, D.			GE CO	OMMISSION	OMB Number: Expires:	3235-0362 January 31 2005		
to Section Form 4 or 5 obligatio may contin	16. Form ANNU		ATEMENT OF CHANGES IN BENI OWNERSHIP OF SECURITIES				FICIAL	Estimated a burden hou response	average rs per		
See Instruct 1(b). Form 3 Ho Reported Form 4 Transaction Reported	Filed purs ^{bldings} Section 17(a	uant to Section 10) of the Public Ut 30(h) of the In	ility Holdin	g Compa	ny A	ct of 1	1935 or Sectio	n			
Grossman Louis J Syr CE			2. Issuer Name and Ticker or Trading Symbol CENTURY BANCORP INC CNBKA]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M	(Month/D	 Statement for Issuer's Fiscal Year E (Month/Day/Year) 12/31/2018 			-	X_ Director 10% Owner Officer (give title Other (specify below) below)				
400 MYSTI	C AVE	12/31/20	518								
			nendment, Date Original Ionth/Day/Year)			(6. Individual or Joint/Group Reporting (check applicable line)				
MEDFORD	, MA 02155					-	X_ Form Filed by Form Filed by Person	One Reporting P More than One R			
(City)	(State) (2	Zip) Tabl	e I - Non-Deri	vative Sec	uritie	s Acqu	ired, Disposed o	f, or Beneficial	ly Owned		
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 at end	Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
				Amount	(A) or (D)	Price	of Issuer's Fiscal Year (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)		
Class A	Â	Â	Â	Â	Â	Â	100	D	Â		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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)

(9-02)

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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)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. O B O E I S G E I S (I
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Grossman Louis J 400 MYSTIC AVE MEDFORD, MA 02155	ÂX	Â	Â	Â		
Signatures						
/s/ William P. Hornby, Attorney-In-Fact	02/06/2019					
**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 provided 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.