FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* Lyne Susan M				S	2. Issuer Name and Ticker or Trading Symbol Starz [STRZA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O STARZ, 8900 LIBERTY CIRCLE				-	3. Date of Earliest Transaction (Month/Day/Year) 08/22/2016							Office	r (give title belo	ow)	Other (specify b	elow)	
(Street)				4	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 Form filed by More than One Reporting Person					
ENGLE\ (City	WOOD, Co	(State)	(Zip)										•			
` •		(State)	(Zip				able I	- Nor	1-De	rivative S	Securitie	s Acqu	ired, Disp	osed of, or I	Beneficially (
1.Title of Security (Instr. 3)		Date (Month/Day/Year)			ate, if	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)		Following	6. Ownership Form:	7. Nature of Indirect Beneficial		
				(Month/Day/Year)		Со	de	V	Amount	(A) or (D)	Price	(Instr. 3 a	or (I)		or Indirect	ect (Instr. 4)	
Series A	Common	Stock	08/22/20	16			S			1,000	D	\$ 31.327	11,707			D	
			Τε					equire	the ed, D	form dis	splays a of, or Be	curre neficia	ently valid		spond unle trol numbe		
1. Title of	2	3. Transaction	on 3A I	(e.,	g., puts, ca	ills, w	arran 5.	ts, op					itle and	8 Price of	9. Number o	of 10.	11. Nature
	Conversion or Exercise Price of Derivative Security		Exec (Year) any	cution Date	e, if Transa Code	if Transaction Code (Instr. 8)				. Date Exercisable nd Expiration Date Month/Day/Year)		Am Und Sec	ount of derlying urities str. 3 and	Derivative Security (Instr. 5)		Ownersh Form of Derivati Security Direct (I or Indire	of Indirect Beneficial Ownership (Instr. 4)
					Code	· V	(A)	(D)	Dat Exe	-	Expiration Date	on Titl	Amount or e Number of Shares				

Reporting Owners

D 4 0 V 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Lyne Susan M C/O STARZ 8900 LIBERTY CIRCLE ENGLEWOOD, CO 80112	X						

Signatures

/s/ Timothy Sweeney, attorney-in-fact	08/24/2016
**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.