FORM 4

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	
OMB Number:	3235-0287
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$\overline{}$	Check this box if no longer subject to Section 16. Form 4
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

						or Sectio	n 30(h) of the	Investmer	nt Comp	any Act of	1940									
Name and Address of Reporting Person*     Goodman Kim C					2. Issuer Name and Ticker or Trading Symbol CHARTER COMMUNICATIONS, INC. /MO/ [ CHTR ]									all ap	plicable) Director			10% Own		
(Last) (First) (Middle) C/O CHARTER COMMUNICATIONS, INC. 400 ATLANTIC STREET					3. Date of Earliest Transaction (Month/Day/Year) 07/26/2016										Officer (give title	below)		Other (spe	ecify below)	
(Street)  STAMFORD CT 06901  (City) (State) (Zip)					4. If Amer	If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)					2. Transact Date (Month/Day	Execu	ution Date,			4. Securi 3, 4 and 5		ed Of (D) (Instr.	D) (Instr. 5. Amount of Sec Beneficially Owner Reported Transac		Following Direct		rship Form: ) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr.		
				(WOITH/Day		(Month/Day/Year)		v	Amount		(A) or (D)	Price	(Instr. 3 and 4)		(S) (IIISti. 4)			4)		
Class A Common Stock					07/26/2	016		A		40	08(1)	Α	\$0		408					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
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. Transa (Instr. 8)	ction Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and A Derivative Se	urities Underlyii 3 and 4)	ng	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following	e es ally q	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					V (A)		(D)	Date Exercisa		xpiration ate			Amount or Number of S	hares		Reported Transaction(s) (Instr. 4)				

## Explanation of Responses:

1. Grant of Restricted Stock (price not applicable) valued at \$97,500 on date of grant, to fully vest on April 26, 2017.

## Remarks:

/s/Daniel J. Bollinger as attorney-in-fact for Kim C. Goodman
\*\* Signature of Reporting Person

Date

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

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

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\* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

\* If the form is filed by more than one reporting person, see Is 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.

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 Number.

POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS, that the undersigned constitutes and appoints each of Richard R. Dykhouse, Thomas E. Proost, Dan Bollinger, and Constance (
The undersigned hereby grants to each attorney-in-fact full power and authority to perform all and every act requisite, necessary and proper to be done in the exerce

This Power of Attorney shall automatically terminate as to named attorneys-in-fact six months after the undersigned ceases to be a Section 16 Reporting Person of the Section 16 Reporting Person Office Person Person

Date: July 28, 2016 By: /s/Kim C.Goodman

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