**Embarq CORP** Form 4/A June 02, 2006

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(City)

Security

(Instr. 3)

(Print or Type Responses)

1. Name and Address of Reporting Person \*

FULLER MICHAEL B

(Middle)

(First)

5454 W 110TH STREET

(Street)

OVERLAND PARK, KS 66211

2. Issuer Name and Ticker or Trading

Symbol

Embarq CORP [EQ]

3. Date of Earliest Transaction

(Month/Day/Year)

05/17/2006

4. If Amendment, Date Original Filed(Month/Day/Year)

05/19/2006

3.

**OMB APPROVAL** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response...

0.5

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director 10% Owner X\_ Officer (give title Other (specify

below) below) Chief Operating Officer

6. 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 2. Transaction Date 2A. Deemed

(Month/Day/Year)

(State)

(Zip)

Execution Date, if

(Month/Day/Year)

TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

Code V Amount (D) Price

4. Securities

(A)

5. Amount of Securities Beneficially Owned Following Reported

Transaction(s)

6. Ownership 7. Nature of Form: Direct (D) or Indirect Beneficial (I) (Instr. 4)

Indirect Ownership (Instr. 4)

(Instr. 3 and 4)

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

4. 5. Number of TransactionDerivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

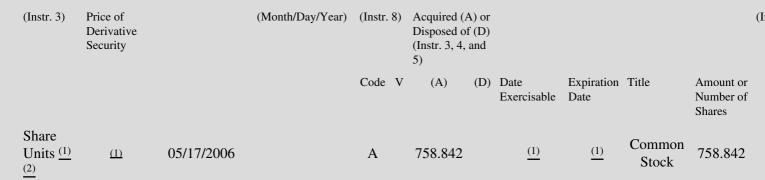
7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

8.

D

S

#### Edgar Filing: Embarq CORP - Form 4/A



## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

FULLER MICHAEL B 5454 W 110TH STREET OVERLAND PARK, KS 66211

**Chief Operating Officer** 

## **Signatures**

Claudia S. Toussaint, attorney-in-fact

06/02/2006

\*\*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).
- Share units are issued under Sprint Nextel Corporation's Executive Deferred Compensation Plan (the "Plan") and are convertible into an amount of cash equal to the value of the issuer's common stock upon the reporting person's retirement, death, or termination of employment in accordance with the terms of the Plan. Termination of employment occurred as a result of the issuer's spin-off from Sprint Nextel Corporation.
- Due to an administrative error, the reporting person's original Form 4 misstated an acquisition of share units held in the Plan as an acquisition of common stock held in the Plan. These share units were issued under the terms of the Plan in connection with the issuer's spin-off from Sprint Nextel Corporation.

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.

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