Meadows C	olin											
Form 4												
February 03												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check th if no lon	aer		o ,						January 31,			
subject t		F CHAN	CHANGES IN BENEFICIAL OWN				NERSHIP OF	Estimated average				
Section 16. SECURITIES								burden hour	rs per			
Form 4 G Form 5	Form 4 or Form 5							A at of 1024	response	0.5		
obligatio	skligstiges											
See Instruction 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).												
(Print or Type	Responses)											
(I find of Type	(Kesponses)											
1. Name and Address of Reporting Person 2. I				. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
Meadows Colin			Symbol	-				Issuer				
	Invesco Ltd. [IVZ]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
INVESCO LTD., 1555			(Month/Day/Year)					Director 10% Owner X Officer (give title Other (specify				
PEACHTR	01/30/2009					below) below)						
						Senior Managing Director						
	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line)						
F1				Filed(Month/Day/Year)				_X_ Form filed by One Reporting Person				
ATLANTA, GA 30309								Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tah	le I - Non-F)orivativa (Socuri	ities Aca	uired, Disposed of	or Bonoficial	v Owned		
	2 Transaction De						-	5. Amount of	6.	7. Nature of		
1.Title of Security	2. Transaction Da (Month/Day/Year			3. 4. Securities Acquired Transaction(A) or Disposed of (D)				Securities	0. Ownership	Indirect		
(Instr. 3) any				Code (Instr. 3, 4 and 5)				Beneficially	Form: Direct			
		Day/Year) (Instr. 8)					Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)			
						(A)		Reported	(Instr. 4)			
						or		Transaction(s) (Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	× ,				
Shares	01/30/2009			А	33,834	А	\$0	127,685	D			
Common							\$					
Shares	01/30/2009			F	12,856	D	ф 11.79	114,829	D			

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.

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
, e	Director	10% Owner	Officer	Other				
Meadows Colin INVESCO LTD. 1555 PEACHTREE STREET NE ATLANTA, GA 30309			Senior Managing Director					
Signatures								
/s/ Jonathan J. Doyle, as Attorney In Fact		02/03/20	09					
<u>**</u> 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).

Remarks:

This Form 4 reports the acquisition of common shares by the reporting person as a result of vesting of certain Share Awards - Performance Based, and the withholding of common shares incident to such vesting to satisfy tax liability.

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.