Edgar Filing: Thompson Elizabeth M - Form 4

Thompson E	lizabeth M										
Form 4	_										
July 03, 2018	8										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	APPROVAL	
UNITED STATES SECURITIES AND EACHANGE COMMISSION									OMB Number:	3235-0287	
Check the	is box		was	snington,	hington, D.C. 20549					January 31	
if no long		EMENT O	Г СНА М	CFS IN	RENEE	ста	IOW	NEBSHID OF	Expires:	2005	
subject to)			NGES IN BENEFICIAL OWNERS SECURITIES				VERSIII OF	Estimated average burden hours per response 0		
Section 1 Form 4 o											
Form 5		oursuant to S	Section 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,	response	0.5	
obligation	ns Section 1			. ,			U	1935 or Section	ı		
may cont <i>See</i> Instru	inue.			vestment	•						
1(b).	letton	. ,			1	•					
(Print or Type F	Responses)										
		- *								<i>(</i>)	
1. Name and A Thompson I	ddress of Reporting	ng Person _		r Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
1 nompson r			Symbol								
				Allen Hamilton Holding Corp				(Check all applicable)			
			[BAH]								
				Date of Earliest Transaction			Director 10% Owner X Officer (give title Other (specify				
				onth/Day/Year)			below) below)				
0203 UKEE	INSDUKU DK	IVE	06/29/2	/2018				EVP and Chief People Officer			
Filed(4. If Ame	f Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Mor	Filed(Month/Day/Year)				Applicable Line)			
								X Form filed by One Reporting Person Form filed by More than One Reporting			
MCLEAN,	VA 22102							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 2A. Deer	med	3.	4. Securi	ties A	cauired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities	Form: Direct			
(Instr. 3)						5)	Beneficially	· /	Beneficial		
		(Month/I	Day/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Reported	(1150.4)	(11301. 4)	
						(A) or		Transaction(s)			
				Code V	Amount		Price	(Instr. 3 and 4)			
Class A					1,133		\$				
Common	06/29/2018			F	(1)	D	ъ 43.73	37,310 <u>(2)</u>	D		
Stock					<u> </u>		13.13				

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno 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						
	Director	10% Owner	Officer	Other			
Thompson Elizabeth M 8283 GREENSBORO DRIVE MCLEAN, VA 22102			EVP and Chief People Officer				
Signatures							
By: /s/ Udele Lin, as Attorney- Thompson	in-Fact fo	И. 07/03/2018					
**C:			Dette				

**Signature of Reporting Person

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).
- (1) Exempt under Rule 16b-3.
- (2) Includes restricted stock units.

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.

Date