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ALLIANCEBERNSTEIN HOLDING L.P.

Form 4

December 03, 2015

							OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287		
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							January 31, 2005 I average ours per 0.5		
(Print or Type Respo	onses)								
1. Name and Address Cranch Laurence		Symbol ALLIAN	Name and Ticker or T NCEBERNSTEIN NG L.P. [AB]	rading	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) C/O ALLIANCI L.P., 1345 AVE AMERICAS		3. Date of 1 (Month/Da 12/01/20	•		Director 10% Owner X Officer (give title Other (specify below)				
NEW YORK, N	(Street) IY 10105		ndment, Date Original th/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				
(City)	(State) (Zip	Table	e I - Non-Derivative S	ecurities Acq	uired, Disposed of	, or Benefici	ally Owned		
		2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securit Transaction(A) or Di Code (Instr. 3, (Instr. 8)	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
units rep. assignments of beneficial 12 owner. of lp interests (1)	2/01/2015		F 9,242	¢	148,481 <u>(2)</u>	I	by rabbi trust under employee incentive compensation award program		
AB Holding Units (1)					34,288 <u>(2)</u>	D			

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

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SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Da	ate	Amou	int of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
					(A) or]
					Disposed						7
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration Date	Title	or Number		
						Exercisable			of		
				Code V	(A) (D)						
				Code v	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Cranch Laurence E C/O ALLIANCEBERNSTEIN L.P. 1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105

General Counsel

Signatures

/s/ Mona Bhalla, attorney-in-fact 12/03/2015

**Signature of Reporting Person Da

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) Units representing assignments of beneficial ownership of limited partnership interests in AllianceBernstein Holding L.P. ("AB Holding Units").
- On December 1, 2015, 16,555 AB Holding Units previously owned by Reporting Person through a rabbi trust under an employee (2) incentive compensation award program were distributed to him. Of these AB Holding Units, 9,242 AB Holding Units were withheld for tax purposes and 7,313 AB Holding Units were delivered to him.

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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