## PayPal Holdings, Inc. Form 3 June 29, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

## INITIAL STATEMENT OF 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

(Print or Type Responses)

| 1. Name and Address of Reporting<br>Person <u>*</u><br>Barrese James  |          |                | 2. Date of Eve<br>Statement<br>(Month/Day/Y | (ear)                                      | 3. Issuer Name <b>and</b> Ticker or Trading Symbol<br>PayPal Holdings, Inc. [PYPL] |  |                           |   |  |
|---|----------|----------------|---|--|--|--|---------------------------|---|--|
| (Last) (Fi  | irst)    | (Middle)       | 06/29/2015                                  |  | 4. Relationship of Reporting Person(s) to Issuer                                   |  |                           | 5. If Amendment, Date Original<br>Filed(Month/Day/Year)   |  |
| 2211 NORTH F  | IRST ST  | REET           |   |  |  |  |                           |   |  |
| (St<br>SAN JOSE, CA<br>95131, CA 9  |          |                |   |  | Director<br>X Officer<br>(give title below   | all applicable)<br>10% (<br>Other<br>) (specify belo<br>, Payment Serv     | w)                        | 6. Individual or Joint/Group<br>Filing(Check Applicable Line)<br>_X_ Form filed by One Reporting<br>Person<br>Form filed by More than One<br>Reporting Person |  |
| (City) (St  | tate)    | (Zip)          |   | Table I - N                                | on-Derivati  | ive Securiti   | es Bei                    | neficially Owned  |  |
| 1.Title of Security<br>(Instr. 4)   |          |                |   | 2. Amount of<br>Beneficially<br>(Instr. 4) |  | 3.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 5) | 4. Nat<br>Owne<br>(Instr. | •   |  |
| Common stock,   | par valu | e \$0.0001     | per share                                   | 0  |  | D  | Â                         |   |  |
| Reminder: Report or<br>owned directly or ind  |          | e line for ead | ch class of secu                            | urities benefici                           | ally SI  | EC 1473 (7-02)   | )                         |   |  |
| Persons who respond to the collection of<br>information contained in this form are not<br>required to respond unless the form displays a<br>currently valid OMB control number. |          |                |   |  |  |  |                           |   |  |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  |          |                |   |  |  |  |                           |   |  |

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 3. Title and Amount of<br>Securities Underlying<br>Derivative Security |                        | 4.<br>Conversion<br>or Exercise | 5.<br>Ownership<br>Form of | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |  |
|---|--|--------------------|--|------------------------|---------------------------------|----------------------------|---|--|
|   |  | Expiration<br>Date | (Instr. 4)   | Amount or<br>Number of | Price of                        | Derivative<br>Security:    |   |  |
|   | Date   |                    | Title  |                        | Derivative                      |                            |   |  |
|   |  |                    | The  |                        | Security                        | Direct (D)                 |   |  |
|   | Exercisable  |                    |  |                        |                                 | or Indirect                |   |  |

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Shares

(I) (Inst

(Instr. 5)

## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |            |                             |       |  |  |  |
|--|---------------|------------|-----------------------------|-------|--|--|--|
| 1 9 9 1 1 1 1 1 1 1 1  | Director      | 10% Owner  | Officer                     | Other |  |  |  |
| Barrese James<br>2211 NORTH FIRST STREET<br>SAN JOSE, CA 95131, CA 95131 | Â             | Â          | CTO & SVP, Payment Services | Â     |  |  |  |
| Signatures   |               |            |                             |       |  |  |  |
| By: Russell S. Elmer For: James J.<br>Barrese                            | (             | 06/29/2015 |                             |       |  |  |  |
| <pre>**Signature of Reporting Person</pre>                               |               | Date       |                             |       |  |  |  |
| Explanation of Responses:  |               |            |                             |       |  |  |  |

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

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.