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HD Supply Holdings, Inc. Form 4 September 09, 2014

September 09, 201	4											
FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITED	STATES		RITIES A			NGE	COMMISSIO	N OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									January 31, 2005 average irs per 0.5		
abligations	-	a) of the F	Public U		ding Cor	npan	y Act	nge Act of 1934, of 1935 or Secti 940				
(Print or Type Respons	es)											
1. Name and Address AFFELDT KATH			Symbol	er Name and pply Hold			-	Issuer	of Reporting Per eck all applicable			
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check an applicable)				
			(Month/I 09/05/2	Day/Year) 2014				Director 10% Owner Officer (give title below) Other (specify below)				
				Amendment, Date Original d(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
ATLANTA, GA 3	0339								More than One Re			
(City) (Si	tate)	(Zip)	Tab	le I - Non-I	Derivative	Secur	rities A	cquired, Disposed	of, or Beneficia	lly Owned		
	saction Date /Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 3 (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)		
Reminder: Report on a	separate line	e for each cla	ass of sect	urities benef	ficially ow	ned di	rectly o	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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security	Derivative		(Instr.	8)	(D)	A) or Disposed of D) Instr. 3, 4,				(Ins	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	09/05/2014		A		2,496		<u>(1)</u>	<u>(1)</u>	Common Stock	2,496	:

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
AFFELDT KATHLEEN J 3100 CUMBERLAND BLVD, SUITE 1700 ATLANTA, GA 30339							
Signatures							
James F. Brumsey, Attorney-in-Fact for Kathl Affeldt	leen J.	09	9/09/201	4			
<u>**</u> Signature of Reporting Person			Date				
Evalenation of Deeneneed	. .						

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).

Grant of restricted stock units under the Companys 2013 Omnibus Incentive Plan. The restricted stock units vest on the earliest of: (1) the one year anniversary of the grant date, (2) the Companys next annual shareholders meeting, or (3) a change in control, and will be settled

(1) one year anniversary of the grant date, (2) the companys next annual shareholders meeting, of (3) a charge in control, and will be settled upon vesting unless the reporting person elects to defer settlement to a later date. A pro rata portion of the award vests upon termination of the reporting persons service due to death, disability or age 75 retirement.

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.