## Edgar Filing: Milacron Holdings Corp. - Form 4

Milacron Hol	ldings Corp.											
Form 4												
July 02, 2015												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							т	PPROVAL				
Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi			vv us	<u>5</u> .011,	D.C. 20				Expires:	January 31,		
if no long		IENT O	F CHAN	GES IN I	ES IN BENEFICIAL OWNERSHIP OF					2005		
subject to Section 10				SECURITIES						Estimated average burden hours per		
Form 4 or	ſ								response	•		
Form 5	<b>1</b> 0							ge Act of 1934,				
obligatior may conti				•	•			of 1935 or Section	on			
See Instru		30(h)	of the Inv	vestment	Compan	y Act	of 19	40				
1(b).												
(Print or Type R	(esponses)											
(I mit of Type I	(esponses)											
1. Name and A	ddress of Reporting	Person <u>*</u>	2. Issuer	Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
Chalmers Bruce A. Symbol								Issuer				
			Milacro	n Holding	s Corp.	[MCI	RN]	(Ch-	-1111:1-1	- )		
(Last)	(First) (N	/liddle)	3. Date of	Earliest Tra	ansaction			(Cneo	ck all applicable	e)		
(Month/Da				ay/Year)				Director 10% Owner				
C/O MILAC	CRON HOLDING	3S	06/30/20	)15				X Officer (giv below)	e title Oth below)	er (specify		
CORP., 301	0 DISNEY STRE	EET						· · ·	Financial Offic	er		
(Street) 4. If A			4. If Amer	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				Month/Day/Year)				Applicable Line)				
								_X_ Form filed by				
CINCINNA	TTI, OH 45209							Person	More than One Ro	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	e 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executi	ion Date, if TransactionAcquired (A) or					Securities	Form: Direct	Indirect		
(Instr. 3)		any Month	/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				2	(D) or Indirect (I)	Beneficial Ownership		
		(Ivionui/	Day/rear)	(Instr. 8)	(instr. 5,	4 and	3)	Owned Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported	. ,			
						or		Transaction(s) (Instr. 3 and 4)				
2				Code V	Amount	(D)	Price	(insu: 5 and 4)				
Common												
Stock, par	06/30/2015			Р	4,500	А	\$ 20	26,380 <u>(1)</u>	D			
value \$0.01 per share												
per share												

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)	3A. Deemed Execution Date, if any (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 Secu 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						
Fg	Director	10% Owner	Officer	Other			
Chalmers Bruce A. C/O MILACRON HOLDINGS CORP. 3010 DISNEY STREET CINCINNATTI, OH 45209			Chief Financial Officer				
Signatures							
le Pruce A							

/s/ Bruce A. 07/02/2015 Chalmers

<u>\*\*</u>Signature of Reporting Person Date

son

## **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) Of the shares reported as beneficially owned, 11,250 represent shares of restricted stock that are subject to vesting and forfeiture.

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.