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

Milacron Ho Form 4	C 1										
June 05, 201									omb af	PROVAL	
FORM	UNITE		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287		
Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont See Instru	F CHAN Section 1 Public U	GES IN SECUR 6(a) of the	BENEFI ITIES e Securit ling Corr	<b>CIA</b> ies E ipany	xchange Act of	NERSHIP OF e Act of 1934, 1935 or Sectior 0	Estimated average burden hours per response .ct of 1934,				
1(b).	uction	()			P	<i>.</i>					
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Kratochvil Jim M.			2. Issuer Name <b>and</b> Ticker or Trading Symbol Milacron Holdings Corp. [MCRN]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check	Check all applicable)		
	CRON HOLDI 200 ALLIANCI		(Month/E 06/02/2	-				X Director Officer (give t below)		Owner er (specify	
CINCINNA		ndment, Da nth/Day/Year	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
	(State)	(Zin)						Person			
(City)	(State)	(Zip)					-	uired, Disposed of		•	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8)	(Instr. 3, 4	sposed 4 and 5 (A) or	of (D)	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)	
Common Stock, par value \$0.01 per share	06/02/2017			Code V	Amount 15,800	(D) D	Price \$ 17.99	7,348	D		

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)	4. Transactio Code (Instr. 8)	of		ate	Amou Under Securi	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Derivative	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Relationships

10% Owner Officer Other

Director

# **Reporting Owners**

**Reporting Owner Name / Address** 

Kratochvil Jim M. C/O MILACRON HOLDINGS CORP. Х 10200 ALLIANCE ROAD SUITE 200 CINCINNATI, OH 45242 Signatures

/s/ Hugh O'Donnell, as Attorney-in-Fact for Jim M. Kratochvil

\*\*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).

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.

06/05/2017

Date