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Cranch Lauren Form 4	ice E												
December 08,	2017												
FORM	4 UNITE	D стате	SECUDI	TIFS A	ND E	VCI	JAN	JCF C	OMMISSION	r	APPROVAL		
	UNITE	DSIALE		nington,				IGE U	01411411551014	OMB Number:	3235-0287		
Check this if no longer subject to Section 16.	STATI												
Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed p ue. Section 1	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											
(Print or Type Re	sponses)												
			Symbol	2. Issuer Name and Ticker or Trading Symbol ALLIANCEBERNSTEIN						5. Relationship of Reporting Person(s) to Issuer			
			HOLDING L.P. [AB]						(Check all applicable)				
(Month/I				e of Earliest Transaction h/Day/Year)					Director 10% Owner Officer (give title Other (specify below) below)				
L.P., 1345 AV AMERICAS			12/01/20	1/					Ge	neral Counse	1		
(Street) 4. If Amen Filed(Month NEW YORK, NY 10105				dment, Date Original h/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)	Tabla	I Non I	Dorivot	vo So	ourit		ired, Disposed of	f or Bonofici	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	Date 2A. De ear) Execut any	emed	3. Transact Code (Instr. 8)	4. Se tion(A) (Inst	ecuritio or Disj r. 3, 4	es Ao poseo	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	/ Amo	ount	or (D)	Price	(Instr. 3 and 4)				
units rep. assignments of beneficial owner. of lp interests (1)	12/01/2017			F	7,5	9	D	\$ 24.85	89,012 <u>(2)</u>	I	by rabbi trust under employee incentive compensation award program		
AB Holding Units (1)									94,415 <u>(2)</u>	D			

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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.

 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. Transact Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amoun Underl Securit (Instr.	nt of lying	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							
	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/ David M. Lesser, by pwr. of att'y	12/08/2	2017						

**Signature of Reporting Person

Date

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, 2017, 13,469 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, 7,519 AB Holding Units were withheld for tax purposes and 5,950 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.