FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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| Check this box if no longer subject to | |
|--|--|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| notruction 1/h) | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Penfield Susan L | | | | | 2. Issuer Name and Ticker or Trading Symbol Booz Allen Hamilton Holding Corp [BAH] | | | | | | | | | ck all app Dire | olicable) ctor | 10% | erson(s) to Issuer 10% Owner | |
|---|---|--|---|---------------------------------|--|---|--|---------------------------------|-----------------------|-----------------------------|-----------------------|--|--|-------------------------|---|---|---|---------------------------------------|
| (Last) 8283 GR | (Fi EENSBOR | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2016 | | | | | | | | | belo | * | Other (specify below) Vice President | |
| (Street) MCLEA | | | 22102 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Inc Line) | | | | |
| | | Tabl | e I - N | on-Deriv | /ative | Sec | uritie | s Ac | quire | d, Di | sposed o | f, or | Bene | ficially | Own | ed | | |
| Date | | | 2. Transac Date (Month/Da | Exe //Year) if ar | | 2A. Deemed Execution Date, f any Month/Day/Year) | | | | 4. Securities Disposed O | | | | Secur Benef Owner | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | v | Amount | (A) (D) | or Pri | се | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | |
| Class A C | Class A Common Stock 06/30/3 | | | | 2016 | 016 | | F | | 2,940 | D | \$ | 29.64 | 31,9 | 15.844 ⁽¹⁾ | D | | |
| Class A C | Common Sto | ock | | 07/01/2 | 07/01/2016 P 27.671 A \$29.5268 31,943.515 ⁽¹⁾ I | | | | | | D | | | | | | | |
| Class A C | Common Sto | ock | 07/01/2016 A 9,714 ⁽²⁾ A \$0 41,657.515 ⁽¹⁾ D | | | | | | D | | | | | | | | | |
| | | Та | ble II | | | | | | | | osed of, convertib | | | | wned | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed ion Date, /Day/Year) | 4. Transa Code (8) | Instr. | 5. Num of Derive Secun Acqu (A) or Dispo of (D) (Instr. and 5 | ative rities ired osed | 6. Date Expira (Month | ntion D | Expiration | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) Amou or Numb of Title Share | | De Se (In | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |

Explanation of Responses:

- ${\bf 1.}\ Includes\ shares\ of\ Class\ A\ restricted\ common\ stock\ and\ restricted\ stock\ units.$
- 2. Grant of restricted stock units under the Issuer's Second Amended and Restated Equity Incentive Plan. Each restricted stock unit represents a contingent right to receive one share of the Issuer's Class A common stock upon vesting. One-third of these restricted stock units are scheduled to vest and settle on each of June 30, 2017, 2018 and 2019.

Remarks:

/s/ Eric Mann as Attorney-in-Fact for Susan L. Penfield

07/05/2016

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.