Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT (
Section 16. Form 4 or Form 5	
obligations may continue. See	

## OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: 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

Name and Address of Reporting Person*     Laben Nancy						2. Issuer Name and Ticker or Trading Symbol Booz Allen Hamilton Holding Corp [ BAH ]								heck	ationship of Reporting all applicable) Director Officer (give title		g Person(s) to Issu 10% Ow Other (s)		vner	
(Last) 8283 GR	(F EENSBOR	irst) O DRIVE	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/16/2018								X	below) below)  EVP, CLO and Secretary			респу		
(Street)  MCLEA						4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivi ne) X	Form fi	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son				
(City)	(S		(Zip) ole I - No	on-Deri	vativ	e Se	curit	ties Ac	auirea	 I. Di	sposed o	of. or Be	neficia	llv (	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/L					action	tion 2A Ex y/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Secu		es Acquired Of (D) (Instr	(A) or	5. Amour Securitie Beneficia Owned Fe		nt of es ally Following	Form (D) o	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
Code V Amount (A) or Price Reported Transaction(s) (Instr. 3 and 4)									tion(s)			(Instr. 4)								
Class A Common Stock 07/16					/2018	018			М		60,000(1	) A	\$17.6	7 92,7		765 <sup>(2)</sup>		D		
Class A Common Stock 07/10				07/16	/2018	018			S		60,000(3	D D	\$46.3	5 <sup>(4)</sup> 32,7		765 <sup>(2)</sup>		D		
		-	Table II								posed of, converti			y Ov	wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deem Executior if any (Month/Da	n Date,	4. Transa Code ( 8)				6. Date Exercisal Expiration Date (Month/Day/Year)		te of Securit ear) Underlyin		rities ring ive Security		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							
Employee Stock Option (right to	\$17.67	07/16/2018			М			60,000	(5)		11/21/2023	Class A Common Stock	60,000		\$0	2,034		D		

## **Explanation of Responses:**

- 1. The exercise of options reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on June 14, 2018.
- 2. Includes restricted stock units.
- 3. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on June 14, 2018.

4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$46.18 to \$46.77, inclusive. The reporting person undertakes to provide to Booz Allen Hamilton Holding Corporation, any of its security holders, or the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

5. All options are fully vested and exercisable.

## Remarks:

By: /s/ Udele Lin, as Attorneyin-Fact for Nancy Laben

07/17/2018

\*\* 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.