1. Name and Address of Reporting Person

MAHAFFEE JOSEPH W

- Last: MAHAFFEE
- First: JOSEPH
- Middle: W
- Address: 8283 GREENSBORO DRIVE
- City: MCLEAN
- State: VA
- Zip: 22102

2. Issuer Name and Ticker or Trading Symbol

Booz Allen Hamilton Holding Corp [ BAH ]

3. Statement for Issuer’s Fiscal Year Ended (Month/Day/Year)

03/31/2012

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

- Director
- 10% Owner
- X Officer (give title below)
- CISO & EVP / Member of 13D Group

6. Individual or Joint/Group Filing (Check Applicable Line)

- X Form filed by One Reporting Person
- Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Date of Transaction</th>
<th>Deemed Execution Date</th>
<th>Transaction Code</th>
<th>Amount of Securities</th>
<th>Price</th>
<th>Ownership Form</th>
<th>Nature of Indirect Beneficial Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class E Special Voting Common Stock</td>
<td>09/30/2011</td>
<td>D4(1)</td>
<td>52,679</td>
<td>D</td>
<td>$0.003</td>
<td>96,591</td>
<td>I</td>
</tr>
</tbody>
</table>

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Explanation of Responses:

1. Upon the exercise of rollover options, the reporting person sold to the issuer, and it repurchased, at par value, one share of Class E special voting common stock for each option exercised.
2. Shares held by the Joseph W. Mahaffee Revocable Trust.

Remarks:

By: /s/ Terence E. Kaden as Attorney-in-Fact for Joseph W. Mahaffee

05/15/2012

By: /s/ Terence E. Kaden as Attorney-in-Fact for Joseph W. Mahaffee

05/15/2012

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).


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.