Edgar Filing: Innophos Holdings, Inc. - Form 4

Innophos Ho	oldings, Inc.											
Form 4	15											
April 01, 201												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								APPROVAL				
	Washington, D.C. 20549							011111551011	OMB Number:	3235-0287		
Check the	is box		V V CL	migu	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0.20					January 31	
if no long		EMENT O	F CHAN	GES I	N B	BENEFI	ICIA	LOW	NERSHIP OF	Expires:	2005	
subject to Section 1)			SECU						Estimated average burden hours per		
Form 4 o										response 0.5		
Form 5	Filed J	oursuant to	Section 1	6(a) of	the	Securit	ies E	xchang	e Act of 1934,			
obligation may cont		17(a) of the	Public U	tility H	loldi	ing Con	ipany	Act of	1935 or Section	1		
See Instru		30(h)	of the In	vestme	ent (Compan	y Ac	t of 194	0			
1(b).												
(Print or Type F	Responses)											
× 51	1 /											
Holler Gail Symbol				Name and Ticker or Trading 5. Relationship of					5. Relationship of	Reporting Pers	on(s) to	
				l					Issuer			
				hos Holdings, Inc. [IPHS]				k all applicable)				
(Last)	(First)	(Middle)	3. Date of	f Earlies	t Tra	nsaction			(Chech	k all applicable)	
				Day/Year)					Director		Owner	
	ECT PLAINS	RD., PO	03/30/2	015					XOfficer (give below)	title Other below)	er (specify	
BOX 8000									· · · · · · · · · · · · · · · · · · ·	President, HR		
	(Street)		4. If Ame	ndment,	Date	e Origina	l		6. Individual or Jo	int/Group Filin	g(Check	
			l(Month/Day/Year)					Applicable Line)				
									_X_Form filed by C			
CRANBUR	Y, NJ 08512								Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - No	n-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	med	3.		4. Securi	ties A	cauired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if			(A) or Di			Securities	Form: Direct		
(Instr. 3)			Code		(Instr. 3,	4 and	5)	Beneficially	(D) or	Beneficial		
		(Month/	Day/Year)	(Instr.	8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
									Reported	(1115417-1)	(1110411-1)	
							(A) or		Transaction(s)			
				Code	V	Amount		Price	(Instr. 3 and 4)			
Common Stock	03/30/2015			F		155 <u>(1)</u>	D	\$ 57.49	1,141	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.

 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)	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Holler Gail 259 PROSPECT PLAINS RD. PO BOX 8000 CRANBURY, NJ 08512			Vice President, HR					
Signatures								
/s/ James A. Testa, attorney-in-fact	03/31	1/2015						

**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) Represents the number of restricted shares granted in 2012/2013/2014 withheld for tax purposes.

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.