

BOOZ ALLEN HAMILTON HOLDING CORP

Reported by **JOHNSON ARTHUR E**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/03/12 for the Period Ending 04/01/12

Address 8283 GREENSBORO DRIVE

MCLEAN, VA 22102

Telephone 703-902-5000

CIK 0001443646

Symbol BAH





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 30(f) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person * JOHNSON ARTHUR E | | | | 2. Is | 2. Issuer Name and Ticker or Trading Symbol Booz Allen Hamilton Holding Corp [BAH] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|-------------------|---|---------------------------------|---|----------------------------|--------------------|----------------|---|--------|-----------------------------|---------------|----------------|--|-------------|---|---|------------|--|
| | | | | | | | | | | | | | X Director | | | 10% Owner | | | |
| (Last) | (Last) (First) (Middle) | | | 3. Г | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | Officer (give | Other (specif | y below) | | | | | | |
| 8283 GREENSBORO DRIVE | | | | | 4/1/2012 | | | | | | | | | | | | | | |
| (Street) | | | | 4. I1 | 4. If Amendment, Date Original Filed (MM/DD/YYYY) 6. Individual or J | | | | | | | | r Joint/G | roup Filing | g (Check Ap | plicable | | | |
| MCLEAN, VA | 22102 (State) | (Zip) |) | | | | | | | | | | | _ X _ Form filed by | | | Person | | |
| | | Ta | ble I - No | n-Deriv | vativ | ve Securit | ies Ac | quir | ed | l, Dis | posed | of, o | r E | Beneficially Owne | | | | | |
| | | | | | 2A. Deemed Execution Date, if any | 3. Trar Code (Instr. | | | 4. Securities Ac (A) or Disposed (Instr. 3, 4 and 5 | | of (D) Fo | | | . Amount of Securities Beneficially Owned ollowing Reported Transaction(s) (nstr. 3 and 4) | | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Cod | le ' | V . | Amou | (A) o | | ce | | | | or Indirect (I) (Instr. 4) | (msu. 4) | |
| Class A Common Stock (1) | | | | 4/1/20 | 12 | | A | | | 979 | A | \$0.0 | 00 | 2221 | | | D | | |
| | Table II | - Deriva | tive Secur | ities Be | enefi | icially Ow | ned (| e.g. | , p | outs, | calls, v | warr | ant | ts, options, conve | rtible se | curities) | | | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Trans. Date | 3A. Deemed Execution Date, if any | 4. Trans. Code (Instr. 8) | e Derivative Secu | | urities or) | rities and Exp | | | Exercisable iration Date | | ritie vativ | and Amount of es Underlying we Security and 4) | (Instr. 5) | | Derivative | Beneficial | |
| | | | | Code | V | (A) | (D) | Date Exerc | cisa | able D | xpiration ate | Title | | mount or Number of ares | | Reported Transaction (s) (Instr. 4) | (I) (Instr. | | |

Explanation of Responses:

(1) Includes restricted stock.

Reporting Owners

| Danastina Ovyman Nama / Address | Relationships | | | | | | | |
|---------------------------------|---------------|-----|-------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% | Owner | Officer | Other | | | |
| JOHNSON ARTHUR E | | | | | | | | |
| 8283 GREENSBORO DRIVE | X | | | | | | | |
| MCLEAN, VA 22102 | | | | | | | | |

Signatures

By: /s/ Terence E. Kaden as Attorney-in-Fact for Arthur E. Johnson

4/3/2012

Date

** Signature of Reporting Person

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 control number.