Edgar Filing: Helming Keith A - Form 4

Helming Keith Form 4	ηΑ									
March 15, 201										
FORM	4 UNITED	STATES	SECU	DITIFS	AND FY	CHANCE	E COMMISSIO	NT	PPROVAL	
Check this		STATES		ashington				Number:	3235-02	
Check this box if no longer CTATENTENTE OF CHANCES IN DENEELCIAL OWNERSHIP OF							Expires:	January 2(31, 005	
subject to Section 16. Form 4 or	ject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per									0.5
Form 5 obligations may contin <i>See</i> Instruct 1(b).	ue. Section 17	(a) of the l	Public U	Jtility Ho	lding Coi		nge Act of 1934, of 1935 or Secti 1940	·		0.0
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u>*</u> Helming Keith A			2. Issuer Name and Ticker or Trading Symbol			-	5. Relationship of Reporting Person(s) to Issuer			
		N. 1. 11 \	AerCap Holdings N.V. [AER]		AERJ	(Check all applicable)				
				Date of Earliest Transaction /onth/Day/Year)			Director	109	% Owner	
AERCAP HOUSE, STATIONSPLEIN 965			03/14/2013				XOfficer (give titleOther (specify below) below) CFO			
Fil			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
SCHIPHOL A	AIRPORT, P7	1117CE					Person	whole than one it	eporting	
(City)	(State)	(Zip)	Tal	ble I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	. Transaction Date Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature o Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D) Price	(Instr. 3 and 4)			
Reminder: Repor	rt on a separate line	e for each cl	ass of sec	ourities bene	eficially ow	ned directly	or indirectly			
	, in the second s				Perso inforr requi	ons who res nation con red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					sposed of, or convertible	Beneficially Owner securities)	d		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A or Disposed (D) (Instr. 3, 4, and 5)					
				Code V	(A) (` '	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(1)</u>	03/14/2013		J <u>(2)</u>	36,234		02/14/2016	04/14/2016	Ordinary Shares	36,234

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Helming Keith A AERCAP HOUSE STATIONSPLEIN 965 SCHIPHOL AIRPORT, P7 1117CE			CFO			
Signatures						

Signatures

/s/ Keith	03/15/2013
Helming <u>**</u> Signature of	Date
Reporting Person	

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) Each Restricted Stock Unit ("RSU") will convert (i) on a 1-for-1 basis into ordinary shares of the issuer upon vesting, (ii) into the cash equivalent, or (iii) into a combination of items (i) and (ii).
- (2) Grant of RSUs pursuant to AerCap Holdings N.V. 2012 Employees and Officers Equity Incentive Plan. This form is filed voluntarily. As a foreign private issuer, AerCap is exempted from Section 16 of the Exchange Act by Rule 3a12-3.

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.