### Edgar Filing: JACOBS DOUGLAS L - Form 4

JACOBS DO	UGLAS L											
Form 4												
July 25, 2017	7											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this												
if no long subject to	F CHAN	ANGES IN BENEFICIAL OWNERSHIP O					Estimated average burden hours per					
Section 16.				SECURITIES								
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5		
obligation												
may conti	nue. Section 17(			vestment (	•			f 1935 or Sectio	n			
See Instru 1(b).	ction	50(II)	of the m	vestment	Company	Act	01 194	ŧŪ				
1(0).												
(Print or Type R	lesponses)											
1. Name and Address of Reporting Person _ 2. Issue				Name <b>and</b> Ticker or Trading 5. Relation				5. Relationship of	5. Relationship of Reporting Person(s) to Issuer			
JACOBS DOUGLAS L				Symbol Clear Channel Outdoor Holdings,								
	-											
			0]				(Check all applicable)					
(Last)	(First) (A	Middle)	3. Date of	Earliest Tra	insaction			X Director	10%	Owner		
			(Month/D	onth/Day/Year)				Officer (give titleOther (specify below)				
	R CHANNEL		07/21/20	)17				below)	Delow)			
	HOLDINGS, IN											
EAST BASS	SE ROAD, SUIT	E 100										
	4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check						
File				th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
SAN ANTO	NIO, TX 78209							Form filed by N				
SANANIO	NIO, 1A 78209							Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat		2A. Deemed Execution Date, if any (Month/Day/Year)				-	5. Amount of	6. Ownership			
Security	(Month/Day/Year)				Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Instr. 3)		•						Owned		Ownership		
		× ·	, , , , , , , , , , , , , , , , , , ,		, (			Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or	р.	(Instr. 3 and 4)				
Class A				Code V	Amount	(D)	Price					
Class A Common	07/21/2017			А	27,722	А	\$0	77,791	D			
Stock	0//2//2017			11	_1,122	11	ΨΟ	, , , , , , , ,	2			

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.

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. 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.

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships				
	Director	10% Owner	Officer		
JACOBS DOUGLAS L C/O CLEAR CHANNEL OUTDOOR HOLDINGS, INC. 200 EAST BASSE ROAD, SUITE 100 SAN ANTONIO, TX 78209	Х				
Signatures					
Lauren E. Dean, as Attorney-in-Fact for Douglas L.					
Jacobs	07/25/2017				
**Signature of Reporting Person		Date			

# **Explanation of Responses:**

Other