Edgar Filing: MOODYS CORP /DE/ - Form 4

MOODYS (CORP /DE/											
Form 4												
March 02, 2	017											
FORM	ЛД								OMB AF	PROVAL		
	UNITEI	D STATES		RITIES A shington			NGE C	COMMISSION	OMB Number:	3235-0287		
Check th							Expires:	January 31,				
if no lon subject t	~ ````	EMENT O	F CHAN	HANGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005		
	Section 16.				SECURITIES				burden hour	•		
Form 4 o									response	0.5		
Form 5 obligatio							•	e Act of 1934,				
may con				•	•			1935 or Section	1			
See Instr		30(h)) of the Ir	vestment	t Compar	iy Ac	t of 194	-0				
1(b).												
(Print or Type	Responses)											
	Address of Reportin	ng Person <u>*</u>	2. Issue	r Name an	d Ticker or	Tradi	ng	5. Relationship of Reporting Person(s) to				
Crimmins N	Symbol	-				Issuer						
						MOOD	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date o	f Earliest T	ransaction			(Check	c all applicable)		
			(Month/I	(Month/Day/Year)				Director	10% Owner			
	TRADE CENT	ER, 250	03/01/2	017				X Officer (give below)	title Othe below)	r (specify		
GREENWI	ICH STREET							· · · · · · · · · · · · · · · · · · ·	rporate Control	ler		
	(Street)		4 If Ame	endment D	ate Origina	1		6 Individual or Io	^ int/Group Filin	g(Check		
· · · · · · · · · · · · · · · · · · ·				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
			1 1100(1110		-)			_X_ Form filed by O	1 0			
NEW YOR	K, NY 10007							Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tab	In T. Mara I	Dentructions	C			an Dan aff ai all	ler Oerren d		
							-	uired, Disposed of,		•		
1.Title of Security	2. Transaction Da			3. Transactiv	4. Securi			5. Amount of Securities	6. Ownership	7. Nature of Indirect		
(Instr. 3)	(Month/Day/Year	any	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Beneficially	Form: Direct Benefici			
× ,		Day/Year) (Instr. 8)				·	Owned	(D) or	Ownership			
								Following	Indirect (I)	(Instr. 4)		
						(A)		Reported Transaction(s)	(Instr. 4)			
						or	D ·	(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price \$					
Stock	03/01/2017			F	825 <u>(1)</u>	D	э 112 91	5,934	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)

Edgar Filing: MOODYS CORP /DE/ - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and ant 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		

Reporting Owners

Reporting Owner Name / Address	Relationships						
Toporoing o whom Funder / Francess	Director	10% Owner	Officer	Other			
Crimmins Michael S							
7 WORLD TRADE CENTER			SVP-Corporate				
250 GREENWICH STREET			Controller				
NEW YORK, NY 10007							
Signatures							

Elizabeth McCarroll, by power of attorney for Michael S. Crimmins

**Signature of 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) Disposition of vested performance accelerated restricted stock.

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.

03/02/2017

Date