Edgar Filing: Alliance Holdings GP, L.P. - Form 4

Alliance Hold	lings GP, L.P.											
Form 4 August 20, 20	15											
									OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check this box								Expires:	January 31, 2005			
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSH								Estimated a	Estimated average		
Section 16 Form 4 or	Section 16. SECURITIES								burden hours per response 0.5			
Form 5	Filed pur	suant to S	Section 16	(a) of the	Securiti	es Ex	chang	ge Act of 1934,	response	0.5		
obligations may contin	⁸ Section $17($							f 1935 or Sectio	n			
See Instruct 1(b).		30(h)	of the Inv	vestment (Company	Act	of 19	40				
(Print or Type Re	esponses)											
1. Name and Ad Davidson Th	2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer						
			Alliance Holdings GP, L.P. [AHGP]					(Check all applicable)				
(Last)	(First) (I	Middle)	3. Date of	Earliest Tra	insaction			(Check an applicable)				
1515 001 151	(Month/Day/Year)					X Director		6 Owner				
1717 SOUTH 400	UITE	08/19/2015					Officer (give title Other (specify below)					
	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check						
File				h/Day/Year)				Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting				
TULSA, OK	74119							Person		eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	4. Securit onAcquired Disposed (Instr. 3, 4)	(A) o of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common units						(2)		0	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price (Derivativ Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom unit	(1)	08/19/2015	А	149	(3)	(2)	Common unit	149	<u>(2)</u>

Edgar Filing: Alliance Holdings GP, L.P. - Form 4

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips				
	Director	10% Owner	Officer	Other			
Davidson Thomas M SR 1717 SOUTH BOULDER SUITE 400 TULSA, OK 74119	Х						
Signatures							
/s/ Thomas M. Davidson, Sr. by Amber Blythe, pursuant to power of attorney dated April 24							

/s/ Thomas M. Davidson, Sr. by Amber Blythe, pursuant to power of attorney dated April 24, 2013	08/20/2015	
<u>**</u> 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) 1 for 1
- (2) Not applicable
- (3) The Phantom units are to be settled in cash upon the reporting person's death or termination.

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.