### Edgar Filing: Gorman Michael Ryan - Form 4

Gorman Mic	hael Ryan											
Form 4												
March 28, 20	018											
FORM	14									PPROVAL		
Washington, D.C. 20549					NGE (	COMMISSION	OMB Number:	3235-0287				
Check this box									Expires:	January 31,		
if no long subject to	NIA I H	EMENT O	F CHAN	GES IN H	BENEFI	CIA	LOW	<b>NERSHIP OF</b>	200			
Section 1				SECURITIES					Estimated average burden hours per			
Form 4 or	r								response	•		
Form 5	Filed p	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,										
obligation	<sup>18</sup> Section $\hat{1}'$							f 1935 or Sectio	n			
may conti See Instru	inue.		of the Inv	•	•	- ·						
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	(asponsos)											
(Print or Type R	(esponses)											
1. Name and A	ddress of Reportir	ng Person <u>*</u>	2. Issuer	Name <b>and</b> Ticker or Trading 5. Ro				5. Relationship of	5. Relationship of Reporting Person(s) to			
Gorman Michael Ryan Symbol				-				Issuer				
	[RLGY]						(Check all applicable)					
(Last)	(First)	(Middle)	3 Date of	Earliest Tra	insaction			Director	10%	6 Owner		
			Day/Year)				Officer (give title Other (specify					
C/O REALOGY HOLDINGS 03/26/20							below)	below)	a			
	PARK AVEN		05120120	/10				Pres/	CEO, NRT LL	С		
	(Street)		4. If Amer	f Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
· · · · · · · · · · · · · · · · · · ·				(Month/Day/Year)				Applicable Line)				
				neu(monus Duy, reur)				_X_ Form filed by One Reporting Person				
MADISON,	NJ 07940							Form filed by I	More than One Re	eporting		
								Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction E	Date 2A. Dee	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		on Date, if					Securities	Form: Direct	Indirect		
(Instr. 3)		any Manth	(D (N)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			·	Beneficially	Indirect (I)	Beneficial		
		(Month)	/Day/Year)				3)	Owned Following		Ownership (Instr. 4)		
								Reported	(Insu: I)	(Instr. 1)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common					7 mount		Thee					
Stock,												
\$0.01 par	03/26/2018			А	25 <u>(1)</u>	А	\$0	18,982	D			
value												
varue												

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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						
	Director	10% Owner	Officer	Other			
Gorman Michael Ryan C/O REALOGY HOLDINGS CORP. 175 PARK AVENUE MADISON, NJ 07940			Pres/CEO, NRT LLC				
Signatures							
/s/ Colleen Johnson as attorney-in-fact	03/28/2018						

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

\*\*Signature of Reporting Person

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Date

(1) Consist of shares underlying dividend equivalent units ("DEUs") on restricted stock units. The DEUs accrued in connection with a quarterly cash dividend paid on March 26, 2018. The DEUs vest on the same terms as the underlying restricted stock units.

#### **Remarks:**

Gorman

Exhibit 24.1 - Power of Attorney of Michael Ryan Gorman. \*\*Previously filed.

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.