

PHIBRO ANIMAL HEALTH CORP  
Form 4  
May 19, 2015

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**BENDHEIM JACK**

2. Issuer Name and Ticker or Trading Symbol  
**PHIBRO ANIMAL HEALTH CORP [PAHC]**

5. Relationship of Reporting Person(s) to Issuer  
  
(Check all applicable)

(Last) (First) (Middle)  
  
300 FRANK W. BURR BLVD., STE 21  
  
(Street)

3. Date of Earliest Transaction (Month/Day/Year)  
05/11/2015

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
President and CEO

TEANECK, NJ 07666

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

| 1. Title of Security (Instr. 3)     | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 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) |   |                    |
|-------------------------------------|--------------------------------------|--|--------------------------------|---|---|--|---|---|--------------------|
|                                     |                                      |  |                                | (A) or (D)  | Price   |  |   |   |                    |
|                                     |                                      |  |                                | Code  | V   | Amount   |   |   |                    |
| Class A Common Stock <sup>(1)</sup> | 05/11/2015                           |  | C                              | 48,000  | A   | <u>(1)</u>   | 48,000  | I | See <sup>(2)</sup> |
| Class A Common Stock <sup>(3)</sup> | 05/15/2015                           |  | S                              | 6,000   | D   | \$ <u>36.4</u> <sup>(4)</sup>                            | 42,000  | I | See <sup>(2)</sup> |
| Class A Common Stock <sup>(3)</sup> | 05/18/2015                           |  | S                              | 6,000   | D   | \$ <u>36.89</u> <sup>(5)</sup>                           | 36,000  | I | See <sup>(2)</sup> |
| Class A Common Stock                | 05/19/2015                           |  | S                              | 6,000   | D   | \$ 36.9  | 30,000  | I | See <sup>(2)</sup> |



## Edgar Filing: PHIBRO ANIMAL HEALTH CORP - Form 4

- (3) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 16, 2015.
- (4) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.3958 to \$36.407, inclusive.
- (5) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.8895 to \$36.8896, inclusive.
- (6) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.893 to \$36.9087, inclusive.

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.