Mylan N.V. Form 3 June 23, 2017

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

**OMB APPROVAL** 

**OMB** Number:

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person

2. Date of Event Requiring Statement

3. Issuer Name and Ticker or Trading Symbol

Mylan N.V. [MYL]

A Vollebregt Sjoerd S

(Last)

(Month/Day/Year) 06/22/2017

4. Relationship of Reporting

5. If Amendment, Date Original

Person(s) to Issuer

\_X\_ Director Officer

Filed(Month/Day/Year)

**BUILDING 4, TRIDENT PLACE,** MOSQUITO WAY

(First)

(Middle)

(Zip)

(Street)

(Check all applicable)

10% Owner Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

HATFIELD, HERTFORDSHIRE, X0Â AL10 9UL

> (City) (State)

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership Form:

or Indirect (I) (Instr. 5)

4. Nature of Indirect Beneficial Ownership

(Instr. 5) Direct (D)

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

Date

Exercisable

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** 

5. 4 Ownership Conversion or Exercise Form of Derivative Price of

6. Nature of Indirect Beneficial Ownership (Instr. 5)

(Instr. 4)

Date

**Expiration Title** 

Amount or Number of Derivative Security: Security Direct (D)

Shares

or Indirect
(I)
(Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Vollebregt Sjoerd S

BUILDING 4, TRIDENT PLACE, MOSQUITO WAY X HATFIELD, HERTFORDSHIRE, X0Â AL10 9UL

### **Signatures**

/s/ Bradley L. Wideman, by power of attorney

06/23/2017

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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#### **Remarks:**

Exhibit 24 - Power of Attorney

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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