FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGE	S IN BENE	FICIAL OV	VNERSHIP

OMB APPROVAL								
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hours per response	: 0.5							

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Simeor (Last)	nd Address of ne Thoma (Fir	st) (ľ	Middle)	2. Issuer Name and Ticker or Trading Symbol ALLIANCEBERNSTEIN HOLDING L.P. [AB] 3. Date of Earliest Transaction (Month/Day/Year) 12/12/2023									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Chief Accounting Officer							
	MMERCE S			4. If A	Amend	ment,	Date o	f Origin	nal File	d (Montl	h/Day/`	Year		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) NASHV	ILLE TN	3	7203											Form filed by More than One Reporting Person						
(City)	 	Check t	his box	to indic	ate that	t a trans		as mad	le pui			nstruction	or written pl	an tha	t is inten	ded to				
		Table	I - Non-Deriva	tive S	Secu	rities	Acq	uired	l, Dis	posed	d of, o	or E	Benefici	ially O	vned					
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			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)							
							Code	v	Amount (A) (C)		(A) or (D)	r Price		Reporte Transac (Instr. 3	ion(s)					
AB Holding Units ⁽¹⁾ 12/12/2023						A ⁽²⁾		3,0	68(2)	A ⁽²⁾	\$2	30.56 ⁽³⁾	³⁾ 5,209 ⁽²⁾ I				through rabbi trust under employee incentive compensation award program			
		Tal	ble II - Derivati (e.g., ρι	ve Se	ecurit	ties A	Acqui	ired, optio	Disp	osed o	of, or rtible	Be se	eneficia curities	lly Ow	ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)	action (Instr.	_	mber rative rities ired r osed)		e Exerc tion Da n/Day/Y	isable a	nd 7	'. Titl Amou Secui Jnde Deriv	e and unt of rities rlying ative rity (Instr.	8. Price Derivat Securit (Instr. 5	ve deri Sec Ben Owr Folk Rep Tran	umber of vative urities eficially ned oowing orted esaction(s) tr. 4)	Forn Direct or In	nership of Indirec		

Explanation of Responses:

- 1. Units representing assignments of beneficial ownership of limited partnership interests in AllianceBernstein Holding L.P. ("AB Holding Units")
- 2. Reporting Person's 2023 long-term incentive compensation award, which was approved by the Section 16 Subcommittee (a committee consisting entirely of independent directors) of the Compensation and Workplace Practices Committee of the Board of Directors as of December 12, 2023, was made in the form of AB Holding Units. Reporting Person therefore may be deemed to have acquired 3,068 AB Holding Units. These AB Holding Units are held in a rabbi trust under AllianceBernstein's incentive compensation award program until they vest and are delivered to the Reporting Person. The award vests, subject to various agreements and covenants set forth in the applicable award agreement, in equal annual increments on each of December 1, 2024, 2025 and 2026.
- 3. Closing price of an AB Holding Unit (NYSE: AB) on the date as of which the award was approved and valued (December 12, 2023).

Remarks:

/s/ Thomas Simeone

** Signature of Reporting Person

12/14/2023

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.