FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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

1. Name and Address of Reporting Person* Siemers William R (Last) (First) (Middle) C/O ALLIANCEBERNSTEIN						Issuer Name and Ticker or Trading Symbol ALLIANCEBERNSTEIN HOLDING L.P. [AB] 3. Date of Earliest Transaction (Month/Day/Year) 02/28/2024								5. Relationship of Reporting P (Check all applicable) Director X Officer (give title below) SVP, Interin				10% C Other below)	Owner (specify	
(Street)	501 COMMERCE STREET (Street) NASHVILLE TN 37203					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					n :	2A. Deemed Execution Date,		e,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		tion(s)	,		(Instr. 4)			
AB Holdi	24				F		16,546(2)	A	\$33.18	(3)	56,	5,568 ⁽²⁾		D						
AB Holding Units ⁽¹⁾ 02/28/202						24			F		21,873 ⁽²⁾	D	\$33.18	3(3)	13,416(2)			I	by rabbi trust under employee incentive comp plan	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed cution Date,	4. Trans	nsaction de (Instr. 5. Numbe of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		mber rative rities ired r osed)	6. Date Exe Expiration (Month/Day		rcisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivativ Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. Units representing assignments of beneficial ownership of limited partnership interests in AllianceBernstein Holding L.P. ("AB Holding Units")
- 2. On February 28, 2024, 21,873 AB Holding Units previously owned by Reporting Person through a rabbi trust under an employee incentive compensation award program were distributed to him. Of these AB Holding Units, 5,327 AB Holding Units were withheld for tax purposes and 16,546 AB Holding Units were delivered to him.
- 3. The closing price of an AB Holding Unit for NYSE composite transactions on February 28, 2024.

Remarks:

/s/ Bill Siemers

03/01/2024

** Signature of Reporting Person

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.