Cinemark Holdings, Inc. Form 4

FORM 4

April 02, 2014

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

OMB APPROVAL

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Form filed by More than One Reporting

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> Cavalier Michael | | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer | | | |
|---|------------------|--|---|--|--|--|
| | | Cinemark Holdings, Inc. [CNK] | (Check all applicable) | | | |
| (Last) | (First) (Middle) | 3. Date of Earliest Transaction | | | | |
| | | (Month/Day/Year) | Director 10% Owner | | | |
| 3900 DALLAS 500 | S PARKWAY, SUITE | 03/31/2014 | _X_ Officer (give title Other (specify below) | | | |
| 300 | | | EVP-General Counsel | | | |
| | (Street) | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person | | | |

PLANO, TX 75093

| (City) | (State) (A | Table Table | I - Non-Do | erivative S | ecurities Ac | quired, Disposed o | of, or Beneficial | ly Owned |
|--------------------------------------|--------------------------------------|-----------------------------------|------------------|-------------------------|--------------------------|--|----------------------------------|----------------------------------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | 3. Transactio | 4. Securition(A) or Dis | es Acquired sposed of | 5. Amount of Securities Beneficially | 6. Ownership Form: Direct (D) or | 7. Nature of Indirect Beneficial |
| | | (Month/Day/Year) | (Instr. 8) | (Instr. 3, 4 | (A) or | Owned Following Reported Transaction(s) (Instr. 3 and 4) | Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common Stock | 03/31/2014 | | Code V F | Amount 37,679 | (D) Price D (1) | 172,831 | D | |

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

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Person

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Title a | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|-----------------|---|-----------------------------------|--------------------|--|---------------|---------------------|--|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | (Month/Day/Year) ve es d | | Amount Underlyi Securitie (Instr. 3 | lying ties | Security (Instr. 5) | Deriv Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | or Title N of | umber | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Cavalier Michael 3900 DALLAS PARKWAY SUITE 500 PLANO, TX 75093

EVP-General Counsel

Signatures

/s/ Michael 04/02/2014 Cavalier

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- (1) The reported shares were withheld by the issuer as payment by the reporting person of his tax liability upon vesting of 89,819 shares of restricted stock.

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.

Reporting Owners 2