Edgar Filing: PHH CORP - Form 4

PHH CORP											
Form 4											
April 02, 201	4										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								-	OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe	ər									January 31,	
subject to STATEMENT OF CHA				IGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average	
	Section 16.				SECURITIES				burden hours per		
Form 4 or Form 5			Castian 14	(a) = f + b = a	C	as Es	1	A at af 1024	response	0.5	
obligation	~ ·	-					-	ge Act of 1934, of 1935 or Sectio	'n		
may conti	nue.		of the Inv	•	•	· ·) []		
See Instru- 1(b).	ction	50(11)	or the m	estinent v	compan.	y 1101	01 17	10			
(Print or Type R	esponses)										
				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
BOSCIA JO	ΝA		Symbol					Issuel			
РНН СС				ORP [PHH]				(Check all applicable)			
(Last)	(First)	(Middle)		3. Date of Earliest Transaction							
(Month/D				-			X_ Director 10% Owner Officer (give title Other (specify				
C/O PHH CORPORATION, 3000 03/31/20 LEADENHALL ROAD			03/31/20	014 - t			below)	below)	er (speeny		
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed(Mon							Applicable Line) _X_ Form filed by One Reporting Person				
MT. LAURE	EL, NJ 08054							Form filed by I			
								Person			
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction					5. Amount of	6. Ownership				
Security	(Month/Day/Y		on Date, if					Securities	Form: Direct	Indirect Beneficial	
(Instr. 3)		any (Month	CodeDisposed of (D)Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Ownership	
(, , , , , , , , , , , , , , , , , , ,								Following	(Instr. 4)		
						(A)		Reported Transaction(s)			
				~		or		(Instr. 3 and 4)			
Common				Code V	Amount 1,499	(D)	Price	,			
Stock	03/31/2014			А	(1)	А	\$0	19,940 <u>(2)</u>	D		
Stoon											

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

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 Acquired, Disposed of, or Beneficially Owned

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

Edgar Filing: PHH CORP - Form 4

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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
L O	Director	10% Owner	Officer	Other			
BOSCIA JON A C/O PHH CORPORATION 3000 LEADENHALL ROAD MT. LAUREL, NJ 08054	Х						
Signatures							
J. Christopher Clifton, Attorney-In-Fact		04/02/2	014				
**Signature of Reporting Person		Date					
Evenlay attack of Da							

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) Represents shares of common stock underlying vested restricted stock units. Each restricted stock unit represents the right to receive one share of common stock that will be issued one year after cessation of service on the Board of Directors.
- (2) Includes 9,940 shares of common stock underlying vested restricted stock units. Each restricted stock unit represents the right to receive one share of common stock that will be issued one year after cessation of service on the Board of Directors.

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.