FORM 4	ļ
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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).

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

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02)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Fint of Type Responses	s)											
1. Name and Address of Reporting Person – CHAPMAN JAMES N			2. Issuer Name and Ticker or Trading Symbol AerCap Holdings N.V. [AER]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
AERCAP HOUSE, S	(First) STATIONS	(Middle) PLEIN 965	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2015				Officer (give title below)	Other (specify b	elow)			
(Street) SCHIPHOL, P7 1117CE			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1. Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Year)			Execution Date, if					of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Ordinary Shares (1)	<u>(2)</u>	12/31/2015		J		3,772	А	\$0	12,608	D		

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

> Persons who respond to the collection of information SEC 1474 (9contained 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

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. N	Jumber	6. Date Exer	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Der	ivative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Sec	urities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Acc	quired			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				(A)	or			4)			0	Direct (D)	
						posed						*	or Indirect	
					of (Transaction(s)	< /	
						str. 3,						(Instr. 4)	(Instr. 4)	
					4, a	nd 5)								
										Amount				
							Date	Expiration		or				
							Exercisable	Expiration Date	Title	Number				
							Excicisable	Date		of				
				Code V	(A)) (D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
CHAPMAN JAMES N AERCAP HOUSE, STATIONSPLEIN 965 SCHIPHOL, P7 1117CE	х							

Signatures

/s/ James Chapman	01/04/2016	
Signature of Reporting Person	Date	

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) This form is filed voluntarily. As a foreign private issuer, AerCap Holdings N.V. is exempted from Section 16 of the Exchange Act by Rule 3a12-3.
- Grant of Restricted Stock pursuant to AerCap Holdings N.V. 2014 Equity Incentive Plan. Part of the Restricted Stock was withheld by AerCap Holdings N.V. to pay taxes (2) Grant of Restricted Stock pursuant to Receipt in incurred by Mr. Chapman in connection with the grant.

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.