### Edgar Filing: Baltic Trading Ltd - Form 4

Form 4	ng Ltd										
<b>FORN</b> Check th if no lor subject to Section Form 4 Form 5 obligation may cor	Pril 10, 2015 <b>FORM 4</b> Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See InstructionTable 2015Statement of the public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Number: 3235-028 Number: January 3 Expires: 200 Estimated average burden hours per response 0		
(Print or Type	Responses)										
Apollo Management Holdings GP, Syn			Symbol		nd Ticker or T		0	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction (Che					(Check	ck all applicable)		
			(Month/) 04/08/2	h/Day/Year) 8/2015				Director     X10% Owner       Officer (give title below)     Other (specify below)			
NEW YOR	(Street) 2K, NY 10019			endment, I onth/Day/Ye	Date Original <sup>car)</sup>		-	5. Individual or Joi Applicable Line) Form filed by Or X_ Form filed by M Person	ne Reporting Per	son	
(City)	(State)	(Zip)	Tab	ole I - Non-	-Derivative S	Securi		ired, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	ed Date, if	3.	4. Securitie omr Disposed (Instr. 3, 4	es Acq d of (E	uired (A)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common stock, par value \$0.01	04/08/2015			S	465,000	D	\$ 1.4576 (1)	6,604,483	Ι	See footnote $(3)$	
Common stock, par value \$0.01	04/09/2015			S	554,624	D	\$ 1.4212 (2)	6,049,859	I	See footnote $(3)$	

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

Persons who respond to the collection of<br/>information contained in this form are not<br/>required to respond unless the formSEC 1474<br/>(9-02)

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

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. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Apollo Management Holdings GP, LLC 9 W. 57TH STREET 43RD FLOOR NEW YORK, NY 10019		Х					
Apollo Management Holdings, L.P. 9 W. 57TH STREET NEW YORK, NY 10019		Х					
Apollo Capital Management GP, LLC 9 WEST 57TH STREET NEW YORK, NY 10019		Х					
Apollo Capital Management, L.P. 9 WEST 57TH STREET NEW YORK, NY 10019		Х					
Apollo Principal Holdings II, L.P. 9 W. 57TH STREET 43RD FLOOR NEW YORK, NY 10019		Х					
Apollo Principal Holdings II GP, LLC 9 W. 57TH ST. 43RD FLOOR NEW YORK, NY 10019		Х					
		Х					

<b>Explanation of Response</b>	s:	
**Signature of Reporting Person	Date	
[see signatures attached as Exhibit 99.2]	04/10/2015	
Signatures		
Apollo SVF Management, L.P. TWO MANHATTANVILLE ROAD PURCHASE, NY 10577		X
APOLLO SPECIAL OPPORTUNITIES MAD ONE MANHATTANVILLE ROAD SUITE 201 PURCHASE, NY 10577	NAGED ACCOUNT LP	X
Apollo Value Advisors, LP TWO MANHATTANVILLE ROAD PURCHASE, NY 10577		X
Apollo Value Investment Master Fund, L.P. 9 WEST 57TH STREET NEW YORK, NY 10019		

- \* 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) See Exhibit 99.1.
- (2) See Exhibit 99.1.
- (3) See Exhibit 99.1.

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.