

DELEK US HOLDINGS, INC.

Reported by MILLER ANTHONY L.

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/14/17 for the Period Ending 12/10/17

Address 310 SEVEN SPRINGS WAY

SUITE 500

BRENTWOOD, TN, 37027

Telephone 6157716701

CIK 0001694426

Symbol DK

Fiscal Year 12/31





[] 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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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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer				
				_	DILLYGHILL I (DV)							(Check all	(Check all applicable)				
Miller Anthony L.						Delek US Holdings, Inc. [DK]							Directo	ar.	10	0% Owner	
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							_				fy balany)	
						10/10/2015								X Officer (give title below) Other (specify below) Executive Vice President			
7102 COMMERCE WAY						12/10/2017											
(Street)				4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)							YY) 6. Individu	6. Individual or Joint/Group Filing (Check Applicable Line				
RRENTWO	OD TN 3	37027											V Form fil	lad by Ona Pan	ortina Darcan		
BRENTWOOD, TN 37027														X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (State) (Zip)																	
İ			Tabl	e I - No	n_De	rivati	ve Sec	ourities A	ani	red Di	snosed o	of or	Beneficially O	wned			
1.Title of Security			1 abi	2. Trans.		2A. De		3. Trans. Co							cially Owned	6.	7. Nature
(Instr. 3)				Date	Execut	ion	(Instr. 8)		Disposed of (D)			Following Repo	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			of Indirect	
					Date, if any				(Instr. 3, 4 and 5)			(Instr. 3 and 4)	(Instr. 3 and 4)			Beneficial Ownershi	
										(A) or			OI			(Instr. 4)	
							Code V		Amount					(1) (Instr. 4)			
Common Stock 12/10/2013				017	,		F		432	D	\$32.76		10373		D		
Common Stock 12/13/2017				017	S		S		1155	D	\$32.793	51	9218		D		
ı																	
ı	Tab	le II - Der	ivativ	e Secui	ities	Bene	ficially	Owned (e.g.	, puts,	calls, w	arran	its, options, coi	nvertible se	curities)		
1. Title of Derivate								imber of		6. Date Exercisable and					9. Number of	10.	11. Nature
Security (Instr. 3)	Conversion or Exercise			(Instante, if any)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Ex	D			ities Underlying ative Security	Security	derivative Securities	Ownership Form of	of Indirect Beneficial
(mou. 3)	Price of Derivative		Í									(Instr. 3 and 4)		(Instr. 5)	Beneficially Owned		Ownership (Instr. 4)
	Security			_		1									Following	Direct (D)	(IIISII. 4)
									Da	te ercisable	Expiration	Title	mount or Number of	of	Reported Transaction(s)	or Indirect	
					Code	V	(A)	(D)	EX	ercisable	Date		Shares		(Instr. 4)	4)	
														•			
Explanation of	Responses	:															
_	-																
Reporting Own	iers																

Reporting Owners

Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Miller Anthony L.							
7102 COMMERCE WAY			Executive Vice President				
BRENTWOOD, TN 37027							

Signatures

/s/ Anthony L. Miller	12/13/2017
** 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).

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 control number.