## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| wasiiiigtoii, D.C. 20343                     | OMB APPROVAL             |           |  |  |  |
|--|--------------------------|-----------|--|--|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number:              | 3235-0287 |  |  |  |
|  | Estimated average burden |           |  |  |  |

hours per response:

0.5

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5           |
| obligations may continue. See          |
| Instruction 1(b).                      |

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

|  |  |         |  |  |                                  | <u> </u>  |  | o oo()    | 00   | iiivestiiiei                         |                         |  | 0. 20 |                 |   |  |   |   |  |  |        |  |
|--|--|---------|--|--|----------------------------------|---|--|-----------|--|--------------------------------------|-------------------------|--|-------|-----------------|---|--|---|---|--|--|--------|--|
| Name and Address of Reporting Person*                    |  |         |  |  |                                  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Graham Holdings Co [ [GHC] ] |  |           |  |                                      |                         |  |       |                 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |   |  |  |        |  |
| <u>Cooney Wallace R.</u>                                 |  |         |  |  | Grandin Frotungs Co [ [GIIC] ]   |   |  |           |  |                                      |                         |  |       |                 | Direct  | or   |   | 10% C   | wner   |  |        |  |
|  |  |         |  |  |                                  |   |  |           |  |                                      |                         |  |       |                 |   |  | r (give title   |   |  | (specify   |        |  |
| (Last)   |  | (First) | (1   | Middle)  |                                  | 3. 0  | ate (  | of Earlie | st Trans   | saction (N                           | lonth/                  | Day/Year)                                |       |                 |   | t  | elow  | ,   |  | below)   |        |  |
| 1300 NO  | RTH 17   | TH ST   | REET                                       | •  |                                  | 01/   | 01/02/2019   |           |  |                                      |                         |  |       |                 |   | Chief Financial Officer  |   |   |  |  |        |  |
|  |  | 111 51  | KLLI                                       |  |                                  |   |  |           |  |                                      |                         |  |       |                 |   |  |   |   |  |  |        |  |
| SUITE 1  | 700  |         |  |  |                                  |   |  |           |  |                                      |                         |  |       |                 |   |  |   |   |  |  |        |  |
|  |  |         |  |  |                                  | -   4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |           |  |                                      |                         |  |       |                 |   | 6. Individual or Joint/Group Filing (Check Applicable Line)                            |   |   |  |  |        |  |
| (Street)   |  |         |  |  |                                  |   |  |           |  |                                      |                         |  |       |                 | -   | ,  | Form  | filed by One  | e Renorti                                    | na Pers  | on     |  |
| ARLING   | TON  | VA      | 2  | 2209   |                                  |   |  |           |  |                                      |                         |  |       |                 |   |  |   | ,   | •  | •  |        |  |
|  |  |         |  |  |                                  | -   |  |           |  |                                      |                         |  |       |                 |   | Form filed by More than One Reporting Person   |   |   |  |  | orting |  |
| (City)   |  | (State) | C  | Zip)   |                                  |   |  |           |  |                                      |                         |  |       |                 |   |  |   |   |  |  |        |  |
| (0.0)  |  | (Otato) |  | P/   |                                  |   |  |           |  |                                      |                         |  |       |                 |   |  |   |   |  |  |        |  |
|  |  |         | Tabl                                       | e I - Nor  | ı-Deri\                          | <i>r</i> ative  | Se   | curitie   | es Ac  | quired,                              | Dis                     | posed c                                  | f, or | Ben             | efici   | ally Ov  | vne   | d   |  |  |        |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D |  |         |  |  |                                  | Execution Date,   |  | n Date,   | Code   | Transaction Disposed Code (Instr. 5) |                         | ities Acquired (A<br>d Of (D) (Instr. 3, |       |                 | 4 and Secu<br>Bene<br>Own   |  | ially<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |        |  |
|  |  |         |  |  |                                  |   |  | Code      | v  | Amount                               |                         | (A) or<br>(D)                            | Price | _ Tra           | Reported Transaction(s) (Instr. 3 and 4)                                |  |   |   | (Instr. 4)                                   |  |        |  |
| Class B Common Stock 01/02/                              |  |         |  |  | 2/2019                           | 2/2019  |  |           |  |                                      | 600                     | 600 A                                    |       | (2              | 2,000   |  | ,000  | D   |  |  |        |  |
|  |  |         | Ta   | ble II - D   | Perivat                          | tive S  | ecu  | ırities   | Acqu   | ired, D                              | ispo                    | sed of,                                  | or B  | enefi           | ciall   | y Own  | ed  |   | ,  |  |        |  |
|  |  |         |  | ((   | e.g., p                          | uts, c  | alls   | s, warı   | ants,  | option                               | s, c                    | onvertib                                 | le s  | ecuri           | ies)  | -  |   |   |  |  |        |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | 2.<br>Conversi<br>or Exerci<br>Price of<br>Derivativ<br>Security | on Da   | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Da<br>if any<br>(Month/Day/Y | Date, Transaction<br>Code (Instr |   | on of  |           | 6. Date Exercisable a<br>Expiration Date<br>(Month/Day/Year) |                                      | е                       | Amount of                                |       | str. 3          | 8. Price<br>Derivati<br>Securit<br>(Instr. 5                            | tive derivativ<br>Sy Securition<br>Benefici<br>Owned<br>Followir<br>Reporte<br>Transac | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owr<br>Forr<br>Dire<br>or Ir<br>(I) (I                            | ership<br>1:<br>ct (D)<br>direct<br>1str. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |        |  |
|  |  |         |  |  |                                  | Code  | v  | (A) (D)   |  | Date<br>Exercisa                     | Date E<br>Exercisable D |  | Title | or<br>Nur<br>of | ount<br>nber<br>res   |  |   |   |  |  |        |  |

## **Explanation of Responses:**

- 1. Class B shares awarded as restricted stock under incentive plan
- 2 N/A

Wallace R. Cooney

01/04/2019

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

Note: 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 Number.