FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
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

1. Name and Address of Reporting Person* <u>Hester John P</u>						2. Issuer Name and Ticker or Trading Symbol Southwest Gas Holdings, Inc. [ SWX ]									k all app Dired	olicable) ctor	10% (	Person(s) to Issuer  10% Owner	
(Last) 5241 SPR	(Fi	rst) ( JNTAIN ROAD	Middle)			oate of 02/20		st Trans	saction (Month/Day/Year)					X	Officer (give title below)  President and CEO				
(Street) LAS VEC			39150-0 (Zip)	0002	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tabl	le I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	enefi	cially	Owne	ed			
Date			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Secur Benef Owne		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 03/02/2					2017	017			D		2,000	D	\$86	.3005	5 64,030.2375		D		
Common Stock															3,6	98.7115	I	By 401(k)	
Common Stock															5,3	42.5148	I	By IRA	
Common Stock														2,422.35		I	By Spouse		
		Та	able II -								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	ivative urity or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  Solution Date (Month/Day/Year)			Transa Code (		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instrand 5	6. Date Expira (Month	tion Da h/Day/Y			nt er			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

**Explanation of Responses:** 

Joshua M. Westerman, POA 03/03/2017

\*\* Signature of Reporting Person D

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).

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.