FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Polar Asset Management Partners Inc.						2. Issuer Name and Ticker or Trading Symbol Leo Holdings Corp. [LHC]									ck all app Dired	olicable) ctor			Owner	
	401 BAY STREET				3. Date of Earliest Transaction (Month/Day/Year) 04/09/2019										belo	er (give title w)	belov		(specify)	
SUITE 1900, P.O. BOX 19 (Street) TORONTO A6 M5H 2Y (City) (State) (Zip)			M5H 2Y4 Zip)	ļ 	4. If	4. If Amendment, Date of 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					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			3. 4. Securition Disposed (5) 5)					5. Amo Securit Benefic Owned Reporte	ies cially Following	Forr (D)	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	ount (A) or (D)		rice	Transaction(s) (Instr. 3 and 4)				(111341. 4)		
Class A ordinary shares, \$0.0001 par value per share 04/09/2					2019				S		72,000	Ι) \$	\$10.31	1,9	1,999,000		I	See footnote ⁽¹⁾	
	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. Deer Executio if any (Month/D		n Date, lay/Year) Transact Code (In:			n of		6. Date Exercisable an Expiration Date (Month/Day/Year) Date Expiratic Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Numbe of Title Shares		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. Polar Asset Management Partners Inc., a company incorporated under the laws of Ontario, Canada, (the "Reporting Person") serves as investment advisor to Polar Multi-Strategy Master Fund, a Cayman Islands exempted company ("PMSMF") and certain managed accounts (together with PMSMF, the "Polar Vehicles") and has sole voting and investment discretion with respect to the securities reported herein which are held by the Polar Vehicles. The Reporting Person disclaims beneficial ownership of the securities reported herein, and this report shall not be deemed an admission that Reporting Person is the beneficial owner of the securities reported herein for the purpose of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose, except to the extent of Reporting Person's pecuniary interest therein.

> /s/ POLAR ASSET MANAGEMENT PARTNERS 04/11/2019 INC., by Greg Lemaich,

General Counsel

** 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).

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.