Saffer Michael Form 3 February 25, 2019

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

January 31, 2005

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

A Saffer Michael

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

02/15/2019

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ASPEN INSURANCE HOLDINGS LTD [AHL]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

C/O ASPEN INSURANCE HOLDINGS LIMITED, 141

FRONT STREET

(Street)

(Check all applicable) \_X\_ Director 10% Owner

Officer Other (give title below) (specify below) 6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person

Form filed by More than One

Reporting Person

HAMILTON. DOÂ HM19

(City) (State) (Zip)

1. Title of Security (Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

4. Nature of Indirect Beneficial

Ownership Form: (Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** 

5. 4 Conversion Ownership or Exercise Form of

6. Nature of Indirect Beneficial Ownership

(Instr. 4)

**Expiration Title** Amount or Date Exercisable Number of Date

Derivative Price of Derivative Security: Security Direct (D)

(Instr. 5)

1

Shares

or Indirect (I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Saffer Michael

C/O ASPEN INSURANCE HOLDINGS LIMITED 141 FRONT STREET HAMILTON, DOÂ HM19

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**Signatures** 

/S/ MICHAEL SAFFER

02/25/2019

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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#### **Remarks:**

Michael Saffer is associated with Apollo Management, L.P. ("Apollo Management") and its affiliated i

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

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