Edgar Filing: ASPEN INSURANCE HOLDINGS LTD - Form 4

ASPEN INS Form 4 April 29, 201	URANCE HO	LDINGS L'	ΓD									
FORM	ΙΛ								OMB AF	PPROVAL		
-	UNITE	D STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287		
Section 16. Form 4 or Form 5 Filed pursuant to Sec				CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES ection 16(a) of the Securities Exchange Act of 1934, ublic Utility Holding Company Act of 1935 or Secti						Lanuary 31, 2005 Estimated average burden hours per response 0.5		
may cont <i>See</i> Instru 1(b).	inue.			vestment	•	· ·			•			
(Print or Type F	Responses)											
1. Name and A Boornazian	ddress of Reportin Brian	ng Person <u>*</u>	Symbol	r Name and [INSURA [HL]				5. Relationship of Issuer (Chec	Reporting Pers			
(Last)(First)(Middle)3. Date of (Month/E)ASPEN INSURANCE HOLDINGS04/28/2LIMITED, 141 FRONT STREET				-				Director 10% Owner X_Officer (give title Other (specify below) Chairman Aspen Re				
(Street) 4. If Amene Filed(Month			ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
HAMILTON	N, D0 HM19							Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Ordinary Shares	04/28/2015			S	751	D	φ 47.48 (<u>1)</u>	10,503	D			

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

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.

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

Security (Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)	of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e 3	(Month/Day/Year)		erlying rities r. 3 and 4)	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting Owners									
]	Reporting Owner Name / Address		Relationships Director 10% Owner Officer Other							
	Directo	Director 10% Owner Officer								
141 FRO	an Brian INSURANCE HOLDINGS LII INT STREET ION, D0 HM19	MITED	Chairman Aspen Re							
Signa	itures									
•	tia Roufca as Attorney-in-Fact	for Brian								
Boornazia	-	04/29/2015								
	**Signature of Reporting Person			Date						
Evolo	nation of Poenar	10001								

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4.

5.

6. Date Exercisable and

7. Title and

Amount of

8. Price of

Derivative

9. Nt

Deriv

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber Expiration Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

The price is the weighted average sale price of the aggregate number of shares that were sold by the reporting person. These shares were sold in multiple transactions at prices ranging from \$47.4800 to \$47.4900. The reporting person undertakes to provide to the issuer, any security holder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number

of shares sold at each separate price. Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

1. Title of 2.