Edgar Filing: ASPEN INSURANCE HOLDINGS LTD - Form 4

ASPEN INS	NIRAN	ICE HOI	DINGS L	TD									
Form 4 July 30, 201				10									
FORM	ЛЛ									OMB AF	PROVAL		
		UNITEI) STATES		RITIES A shington	OMMISSION	OMB Number:	3235-0287					
Check th if no lon										Expires:	January 31, 2005		
subject t Section Form 4 o	o 16.	STATE	CMENT O	F CHAN	NGES IN SECUF	ERSHIP OF	Estimated average burden hours per response 0						
Form 5 obligation may con <i>See</i> Instr 1(b).	tinue.	-	7(a) of the	Public U		ding Co	mpan	y Act of	Act of 1934, 1935 or Sectior	1			
(Print or Type	Respons	es)											
1. Name and Address of Reporting Person <u>*</u> Green Karen Ann			Symbol ASPEN	er Name and N INSURA			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				LTD [A	AHL]				(Cheel	x an applicable)		
					of Earliest T Day/Year)	ransaction			Director 10% Owner X Officer (give title Other (specify				
ASPEN IN LIMITED,				07/29/2	-				below) CEO AIU	below) JK Ltd AMAL	Ltd		
(Street) 4. If Amendment, Date Orig Filed(Month/Day/Year)						-	Original 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting						
HAMILTO	N, D0	HM19							Person	ore than one ke	porting		
(City)	(St	ate)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	iired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)		h/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transactio Code (Instr. 8)	(Instr. 3,	4 and (A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Ordinary	07/29	/2013			Code V F	Amount 100	(D) D	Price \$	19,576	D			
Shares								37.385	,				
Ordinary Shares	07/29	/2013			S	2,200	D	\$ 37.39	17,376	D			
Ordinary Shares	07/29	/2013			F	300	D	\$ 37.4	17,076	D			
Ordinary Shares	07/29	/2013			F	300	D	\$ 37.41	16,776	D			
Ordinary	07/29	/2013			F	400	D	\$ 37.43	16,376	D			

Shares

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Ordinary Shares	07/29/2013	S	500	D	\$ 37.44 15,876	D
Ordinary Shares	07/29/2013	S	800	D	\$ 37.45 15,076	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)

1. Title of Derivative Security (Instr. 3)	2.3. Transaction Date3A. DeemedConversion(Month/Day/Year)Execution Ior ExerciseanyPrice of(Month/DayDerivativeSecurity			ate, if	Code of			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
					Code V	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repor	rting O	wners											
J	Reporting Ow	vner Name / Address		Director	r 10% O	wner		Relationships ficer			Other		
ASPEN II 141 FROI	Green Karen Ann ASPEN INSURANCE HOLDINGS LIMITED 141 FRONT STREET HAMILTON, D0 HM19						CJ	EO AIUK I	Ltd AMAI	Ltd			
Signa	tures												
/s/ Patrici	ia Roufca as	s Attorney-in-fact	for Karen		07/	30/20)13						

Green <u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* 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).

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Remarks:

The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan established by the reporting person on J

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.