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Inline Coursel

Form 4											
February 12										PPROVAL	
FORM	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check the check	iger STATEN	box					LOW	NERSHIP OF	Expires:	January 31, 2005	
subject t Section Form 4	16.	SECURITIES							Estimated average burden hours per response		
Form 5 obligation may corn See Instr 1(b).	ons Section 170	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									
(Print or Type	Responses)										
Julian Cusack Symbol ASPEN (Last) (First) (Middle) 3. Date of (Month/D ASPEN INSURANCE HOLDINGS LIMITED, 141 FRONT STREET (Street) 4. If Ame			•				-	5. Relationship of Reporting Person(s) to Issuer			
			ASPEN INSURANCE HOLDINGS LTD [AHL]					(Check all applicable)			
			3. Date of Earliest Transaction(Month/Day/Year)02/08/2013					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Risk Officer			
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
HAMILTO	N, D0 HM19							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
(Instr. 3) any		Execution any	n Date, if	3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)				Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Ordinary				Code V		or (D)	Price	(Instr. 3 and 4)			
Shares	02/08/2013			A	2,125	А	<u>(1)</u>	102,276	D		
Ordinary Shares	02/08/2013			F <u>(2)</u>	1,105	D	\$ 35.43	101,171	D		

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

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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. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Share Units (2012 Grant)	(3)	02/08/2013		М	2,125	(4)	(4)	Ordinary Shares	2,125	Ĺ

Reporting Owners

Reporting Owner Name / Address		Relationships					
topoting of the runner runness	Director	10% Owner	Officer	Other			
Julian Cusack ASPEN INSURANCE HOLDINGS LIMITED 141 FRONT STREET HAMILTON, D0 HM19	Х		Chief Risk Officer				
Signatures							
/s/ Patricia Roufca as Attorney-in-fact for Julian Cusack		02/12/2013					
<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).
- (1) Ordinary shares acquired upon mandatory conversion of previously granted Restricted Share Units.
- (2) Ordinary shares withheld in order to satisfy tax liability upon vesting of previously granted Restricted Share Units.
- (3) Each Restricted Share Unit represents the right to receive one share of the Issuer's Ordinary Shares

Represents 2012 Restricted Share Units granted on February 8, 2012 under our 2003 Share Incentive Plan (as amended). One-third of the 2012 Restricted Share Units vests annually on the anniversary of the grant date over a three-year period, in each case subject to the

(4) Reporting Person's continued service. Upon vesting of the 2012 Restricted Share Units, the Reporting Person shall be entitled to received a number of Ordinary Shares equal to the number of Restricted Share Units then vesting.

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.