Edgar Filing: HCC INSURANCE HOLDINGS INC/DE/ - Form 4

HCC INSURANCE HOLDINGS INC/DE/ Form 4 September 16, 2014

FORM	ГЛ						OMB AP	PROVAL		
Washington, D.C. 20549							OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES SECURITIES SECURITIES 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 A SCHELL M	ddress of Reporting Perso ICHAEL J	Symbol	Name and Tio SURANCE / [HCC]		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)(First)(Middle)3. Date of Earliest Transaction (Month/Day/Year)C/O HCC INSURANCE09/15/2014HOLDINGS, INC., 1340309/15/2014NORTHWEST FREEWAY5.000000000000000000000000000000000000				action		Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President				
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
HOUSTON,	, TX 77040				ore than One Rep	oorting				
(City)	(State) (Zip)	Table	I - Non-Deri	vative Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	any	ution Date, if (nth/Day/Year)	Transaction(A	(A) or	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)	Ownership		
Common Stock						99,127	D			
Common Stock	09/15/2014		J <u>(1)</u> V 29	94 A	\$ 38.208	99,421	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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying tities (. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
r u	Director	10% Owner	Officer	Other			
SCHELL MICHAEL J C/O HCC INSURANCE HOLDINGS, INC. 13403 NORTHWEST FREEWAY HOUSTON, TX 77040			Executive Vice President				
Signatures							
Alexander M Ludlow as Attorney in Fact for Schell	09/16/2014						
**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) Shares acquired uner the HCC Insurance Holdings, Inc. Employee Stock Purchase Plan on September 15, 2014.

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.