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Allied World Assurance Co Holdings, AG Form 4 August 02, 2013

FORM	Δ								OMB AI	PPROVAL		
	• • UNITE	D STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check thi if no long	or								Expires:	January 31, 2005		
subject to Section 1 Form 4 or Form 5	6. r	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								average irs per 0.5		
obligatior may conti <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the		ility Hold	ing Con	ipany	Act o	f 1935 or Section	n			
(Print or Type R	Responses)											
Knight W. Gordon Symbol Allied V				Name and Vorld Ass			ıg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				s, AG [A'								
(Last) (First) (Middle) 3. Date of (Month/Da				Earliest Tra ay/Year)	ansaction			Director 10% Owner X Officer (give title Other (specify below) below)				
CO. HOLDI	ORLD ASSUF INGS, INSTRASSE 8	RANCE	08/01/20)13				· · · · · · · · · · · · · · · · · · ·	WACUS & A'	WNAC		
	(Street) 4. If Amer Filed(Mon				-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
BAAR/ZUG	6, V8 CH-6340							Form filed by M Person	Iore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative	Securi	ties Aco	quired, Disposed of	, or Beneficial	lly Owned		
(Instr. 3) any			emed on Date, if /Day/Year)	3. Transactic Code (Instr. 8)		4 and (A)	d of	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Shares	08/01/2013			S <u>(1)</u>	750	D	\$ 94.8	23,183 <u>(2)</u>	D			
Reminder: Rep	ort on a separate li	ine for each c	lass of secu	rities benefi	cially own	ed dir	ectly 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)

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)		Transacti Code (Instr. 8)	of	(Month/Day/ e	ate	Amour Underl Securit (Instr. 1	nt of lying	Derivative Security (Instr. 5)	Deriv Secur Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repor	rting O	wners									
	Reporting	Owner Name / Add	ress			Relat	ionships				
	Reporting	Owner Name / Add	ress	Director	10% Owne	Relat ier Officer	ionships			Other	
AG LINDENS	. Gordon	SSURANCE CO. 3		Director	10% Owne	er Officer	nt, AWAC	CUS &		Other	
ALLIED AG LINDENS	7. Gordon WORLD A STRASSE 8 UG, V8 CH	SSURANCE CO. 3		Director	10% Owne	er Officer Preside	nt, AWAC	CUS &		Other	
ALLIED AG LINDENS BAAR/ZU Signa	7. Gordon WORLD A STRASSE 8 UG, V8 CH	SSURANCE CO. 3 -6340			10% Owne	er Officer Preside	nt, AWAC	CUS &		Other	
ALLIED AG LINDENS BAAR/ZU Signa /s/ Wayno Attorney	7. Gordon WORLD A STRASSE 8 UG, V8 CH tures	SSURANCE CO. 3 -6340 by Power of	HOLDINGS,		10% Owne	er Officer Preside	nt, AWAC	CUS &		Other	

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4.

5.

6. Date Exercisable and 7. Title and

8. Price of 9. Nu

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

3. Transaction Date 3A. Deemed

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The sale of Common Shares reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 28, 2013.
- (2) Includes 252 Common Shares acquired on June 30, 2013 pursuant to the Company's Amended and Restated 2008 Employee Share Purchase Plan.

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.