LAVIN WILLIAM K Form 4 April 27, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading LAVIN WILLIAM K Issuer Symbol ALLEGHANY CORP /DE [Y] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) _X__ Director 10% Owner Other (specify Officer (give title 190 BEACH 137TH STREET 04/26/2010 below) (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting BELLE HARBOR, NY 11694 Person

| (City) | (State) (Z | Zip) Table | I - Non-De | erivative S | ecurities | s Acquired, | Disposed o | of, or Beneficial | lly Owned |
|--------------------------------------|--------------------------------------|---|--------------------|--------------------------------------|-----------|------------------------------|------------|----------------------------------|----------------------------------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | 3. Transactio | 4. Securit onAcquired Disposed | (A) or | 5. Amo Securit Benefic | ties | 6. Ownership Form: Direct (D) or | 7. Nature of Indirect Beneficial |
| | | (Month/Day/Year) | (Instr. 8) Code V | (Instr. 3, 4) Amount | (A) or | | ing | Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| Common Stock | 04/26/2010 | | A | 250 | Α (1 | 2,409 | | D | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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| 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. Transac Code (Instr. 8 | ction 3) I S (I | Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | ; | | , , | | 8. Price Derivat Security (Instr. 5 |
|---|---|---|---|------------------------------------|------------------------------|--|-----|--------------------|-----------------|--|--|
| | | | | Code ' | | 4, and 5) (A) (D) | | Expiration Date | Title | Amount or Number of Shares | |
| Option (right to buy) | \$ 300.72 | 04/26/2010 | | A | | 1 | (2) | 04/25/2020 | Common Stock | 500 | <u>(2)</u> |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------------|--|--|--|--|
| • | Director | 10% Owner | Officer Other | | | | |
| LAVIN WILLIAM K 190 BEACH 137TH STREET BELLE HARBOR, NY 11694 | X | | | | | | |

Signatures

Christopher K. Dalrymple, Attorney-in-Fact

04/27/2010

**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) Grant of restricted stock units for no cash consideration under 2010 Directors' Stock Plan
- (2) One-third of such option becomes exercisable on each of the first, second and third anniversaries of the date of grant. The option was granted for no cash consideration.

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.

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