#### HCC INSURANCE HOLDINGS INC/DE/

Form 4

March 23, 2015

## FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **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(b).

(Last)

(City)

1. Name and Address of Reporting Person \*

Williams Christopher

(First) (Middle)

C/O HCC INSURANCE HOLDINGS, INC., 13403 NORTHWEST FREEWAY

(Street)

(State)

HOUSTON, TX 77040

2. Issuer Name and Ticker or Trading

Symbol

**HCC INSURANCE HOLDINGS** INC/DE/ [HCC]

(Month/Day/Year)

Filed(Month/Day/Year)

3. Date of Earliest Transaction 03/04/2015

4. If Amendment, Date Original

Α

5. Relationship of Reporting Person(s) to

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

Issuer

(Check all applicable)

\_X\_\_ Director 10% Owner X\_ Officer (give title Other (specify

below) Chief Executive Officer

6. Individual or Joint/Group Filing(Check

(D) or

Indirect (I)

(Instr. 4)

D

6. Ownership 7. Nature of Form: Direct Indirect

Beneficial

Ownership

(Instr. 4)

(9-02)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of 2. Transaction Date 2A. Deemed Security (Instr. 3)

(Month/Day/Year)

03/04/2015

Execution Date, if

(Zip)

(Month/Day/Year)

3. 4. Securities Acquired 5. Amount of Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)

35,856

Securities Beneficially Owned Following Reported

Transaction(s) (Instr. 3 and 4)

210,440

Price Code V Amount (D)

(A)

\$0

Stock

Common

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)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration D		7. Title at Amount of		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(monda, Day, Teal)	(Month/Day/Year)	Code (Instr. 8)	`			Underlyin Securities (Instr. 3 a	ng s	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	nount umber uares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
. 0	Director	10% Owner	Officer	Other			
Williams Christopher							
C/O HCC INSURANCE HOLDINGS, INC.	X		Chief Executive Officer				
13403 NORTHWEST FREEWAY	Λ						
HOUSTON, TX 77040							

## **Signatures**

Alexander M Ludlow as attorney-in-fact for Christopher J.B. Williams

03/13/2015

\*\*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).

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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