Edgar Filing: Crystal James W - Form 4

Form 4	S VV										
October 07, 2										PROVAL	
FORM	 4 UNITE					COMMISSION	OMB Number:	3235-0287			
Check thi if no long subject to Section 14 Form 4 on Form 5 obligatior may conti <i>See</i> Instru 1(b).	6. Filed p Section 1	Washington, D.C. 20549 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							Lanuary 31,Expires:2005Estimated averageburden hours perresponse0.5		
(Print or Type R	Responses)										
1. Name and A Crystal Jame	Symbol	Name and			ng	5. Relationship of Reporting Person(s) to Issuer					
(Last) C/O GLOBA GROUP, IN EAST, SUIT	3. Date of (Month/D 10/05/20	-	ansaction			(Check all applicable) <u>X</u> Director Officer (give title below) Delow) (Check all applicable) 10% Owner Other (specify below)					
				ndment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Execution any	n Date, if	3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose	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)	Indirect Beneficial	
Class A Common Shares	10/05/2010			A	1,188 (1)	A	\$ 16.35	1,188	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly 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)

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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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Other

Reporting Owners

**Signature of Reporting Person

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Crystal James W C/O GLOBAL INDEMNITY GROUP, INC. X 3 BALA PLAZA EAST, SUITE 300 BALA CYNWYD, PA 19004 Signatures /s/ Linda Hohn Attorney-in-fact 10/07/2010

Explanation of Responses:

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

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Represents the grant of 466 shares of restricted Class A common shares under the Issuer's Share Incentive Plan in recognition of service rendered as a Board member to Global Indemnity plc, and 722 shares of restricted Class A common shares under the (1)Issuer's Share Incentive Plan in recognition of service rendered as a Board member to Global Indemnity Group, Inc., an indirect wholly-owned subsidiary of the Issuer.

Remarks:

See footnote page

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.