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Global Indemni	ity plc										
Form 4 July 05, 2016											
	Л							OMB AF	PROVAL		
FORM	4 UNITED S	TATES SECUE Was	RITIES AN Shington, D			GE CO	MMISSION	OMB Number:	3235-0287		
Check this b if no longer subject to Section 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF						Expires: January 31 2005 Estimated average burden hours per				
Form 5 obligations may continu	Form 4 orresponse0.5Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,5obligationsSection 17(a) of the Public Utility Holding Company Act of 1935 or Section30(h) of the Investment Company Act of 1940										
(Print or Type Resp	ponses)										
Lederman bruce r Symbol								. Relationship of Reporting Person(s) to ssuer (Check all applicable)			
(Last)(First)(Middle)3. Date of Ear (Month/Day/)C/O GLOBAL INDEMNITY PLC, 306/30/2016BALA PLAZA EAST, SUITE 300								X_ Director 10% Owner Officer (give title Other (specify elow) below)			
	(Street)		Filed(Month/Day/Year)				5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person				
BALA CYNW	YD, PA 19004					_	_ Form filed by Mo erson				
(City)	(State) (A	Zip) Tabl	e I - Non-Der	vivative Se	curitie	es Acquir	ed, Disposed of,	or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		Code (Instr. 8)	4. Securi ion(A) or D (Instr. 3,	ispose 4 and (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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
CALSS A ORDINARY SHARES	06/30/2016		A	806 <u>(1)</u>		\$ 27.53	4,729	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	1		Secur	ınt 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		

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Reporting Owners

Reporting Owner Name / Address		Relations	ips			
	Director	10% Owner	Officer	Other		
Lederman bruce r C/O GLOBAL INDEMNITY PLC 3 BALA PLAZA EAST, SUITE 300 BALA CYNWYD, PA 19004	Х					
Signatures						
/s/Stephen W. Ries Attorney-in-fact	07/05/2016					
**Signature of Reporting Person	Date	e				
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).

Represents the grant of 357 shares of restricted A ordinary shares under the Issuer's Share Incentive Plan that vest on the 24 month anniversary of the award in recognition of service rendered as a Board member to Global Indemnity plc, and 449 shares of restricted A ordinary shares under the Issuer's Share Incentive Plan that vest on the 24 month anniversary of the award in recognition of service

rendered as a Board member to Global Indemnity Group, Inc., an indirect wholly-owned subsidiary of the Issuer.

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.