Edgar Filing: WEHR JAMES D - Form 4

WEHR JAMES Form 4 January 03, 20 FORM Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	4 UNITED STATE SOX STATEMENT (Filed pursuant to Section 17(a) of the 200	Washi DF CHANG S Section 16(a Public Utili	FIES AND EXCHA ington, D.C. 20549 ES IN BENEFICIA SECURITIES a) of the Securities H ity Holding Companistment Company Ad	AL OWNE Exchange A ny Act of 1	ERSHIP OF Act of 1934,	OMB AP OMB Number: Expires: Estimated av burden hour response		
(Print or Type Res	ponses)							
WEHR JAMES D Symbol			ame and Ticker or Trad lemnity Ltd [GBLI]	Is	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Middle)		arliest Transaction			••		
	L INDEMNITY , 3 BALA PLAZA , 300	(Month/Day, 12/31/201		_	_X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street)	4. If Amendi Filed(Month/	ment, Date Original Day/Year)	А	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
BALA CYNW	/YD, PA 19004			P	erson	r		
(City)	(State) (Zip)	Table I	- Non-Derivative Secu	rities Acquir	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. (Month/Day/Year) Exe any (Mo	cution Date, if	Transaction(A) or Disp Code (Instr. 3, 4 (Instr. 8)		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)	
CLASS A ORDINARY SHARES CLASS A ORDINARY	12/31/2018		A 276 (1)	¢	276 3,040	I	See Footnote (2)	
SHARES								

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) tive ties red sed 3,		Amou Under Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners									
R	eporting Owr	ner Name / Address	Director	Relatio 10% Own	o nships her Office	er Other					
3 BALA	BAL INDE	MNITY GROUP ST, SUITE 300 A 19004	, INC. X								
Signa	tures										
/s/Stephe Attorney-	en W. Ries in-fact		01/03/2019								

<u>**</u>Signature of Reporting Person

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).

Date

Represents the grant of 83 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 Limited, and 193 shares of restricted

- (1) An 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.
- (2) Mr. Wehr receives payment for his services as a Director via Golden Eye Advisors, LLC. Mr. Wehr is the sole member of Golden Eye Advisors, LLC.

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.