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HCC INSURANCE HOLDINGS INC/DE/

Form 4

February 25, 2008

FORM 4

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

OMB Number:

3235-0287

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

OMB APPROVAL

Estimated average burden hours per

response...

5. Relationship of Reporting Person(s) to

Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

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

SECURITIES

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

See Instruction

Molbeck John Niels Jr		Symbol HCC INSURANCE HOLDINGS INC/DE/ [HCC]					Issuer (Check all applicable)			
(Last)	(First)	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/21/2008			_	_X_ Director 10% Owner X Officer (give title Other (specify below) President & COO			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			I	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
HOUSTON, TX							Ī	Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivativ	e Secu	rities Acqui	ired, Disposed of,	or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8)		esed of 4 and (A) or		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)
Common Stock								15,000	D	
Common Stock	02/21/2008			P	3,000	A	\$ 24.7859	18,000	D	

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)

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. Transaction Code (Instr. 8)	5. Dr.Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		e	7. Title and A Underlying S (Instr. 3 and	Securities	8. H Der Sec (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Purchase (1)	\$ 24.47					(2)	04/04/2013	Common Stock	37,500	
Option to Purchase (3)	\$ 30.85					01/05/2007	01/05/2011	Common Stock	12,500	
Option to Purchase (3)	\$ 33.56					<u>(4)</u>	03/23/2011	Common Stock	200,000	
Option to Purchase	\$ 31.92					<u>(5)</u>	05/09/2012	Common Stock	150,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Molbeck John Niels Jr	X		President & COO				
HOUSTON, TX							

Signatures

John N. Molbeck, Jr.	02/25/2008		
**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) Option to purchase granted pursuant to the 2001 Flexible Incentive Plan.

Reporting Owners 2

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- (2) The options vest equally, annually over a 5 year period beginning April 4, 2006 @ 7,500 shares per year.
- (3) Option to purchase granted pursuant to the 2004 Flexible Incentive Plan.
- (4) The options vest as follows: 66,666 on 3/23/07; 66,666 on 3/23/08; and 66,668 on 3/23/09.
- (5) The options vest equally, annually over a 4 year period beginning December 31, 2007 @ 37,500 shares per year.

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.