Allied World Assurance Co Holdings, AG Form 4 February 19, 2016

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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL					
Check this box								Number:	3235-0287			
if no long	er STATE								Expires:	January 31, 2005		
subject to Section 10 Form 4 or	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								verage rs per 0.5		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 4 or 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 (0.5)												
(Print or Type R	Responses)											
1. Name and Address of Reporting Person <u>*</u> Duffy James F			2. Issuer Name and Ticker or Trading Symbol Allied World Assurance Co				ıg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			Holdings, AG [AWH]									
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					Officer (give title Other (specify				
CO. HOLDI AG, GUBEI	LSTRASSE 24		02/17/20	016				below)	below)			
IOWER, IS	(Street)		4 If A	- descent Des		1			int/Community	-(01 1		
· · ·				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)_X_ Form filed by One Reporting Person				
ZUG, V8 63	00							Form filed by M Person	Iore than One Rep	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	sposed	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		
Common Shares	02/17/2016			F	463 <u>(1)</u>	D	\$ 31.04	37,662	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.

a currently valid OMB number.

vesting of Restricted Stock Units.

*

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(1)

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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)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

r

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Othe			
Duffy James F ALLIED WORLD ASSURANCE CO. HOLD GUBELSTRASSE 24, PARK TOWER, 15TH ZUG, V8 6300	Х						
Signatures							
/s/ Theodore Neos, by Power of Attorney	02/19/2016						
**Signature of Reporting Person	Date						
Explanation of Responses	S:						

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

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Exclusively represents shares withheld by the Company with respect to the payment of Swiss withholding tax liability incurred upon the

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