## Edgar Filing: Carmilani Scott A - Form 4

Carmilani S Form 4	cott A								
September 1	14, 2010								
FORM	<b>A</b> 4 UNITED	STATES SECU Wa	RITIES A			NGE CO	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287
Check th if no lon subject th Section Form 4 Form 5 obligation may cor	nger to 16. or Filed put	MENT OF CHAI rsuant to Section (a) of the Public U	NGES IN SECUI 16(a) of tl	BENEF RITIES ne Securi	ICIA ties E	Exchange	Act of 1934,	Expires:January 31 2005Estimated average burden hours per response0.5	
See Inst 1(b).		30(h) of the I	nvestmen	t Compar	ny Ac	et of 1940	)		
(Print or Type	Responses)								
1. Name and A Carmilani S	Symbol					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	VORLD ASSURA INGS, LTD, 27	(Month/	of Earliest T Day/Year) 2010	ransaction			X Director X Officer (give t below) President, Cl		
	(Street)		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		
PEMBRO	KE, D0 HM 08					:	Form filed by Mo Person	ore than One Rep	porting
(City)	(State)	(Zip) Tab	ole I - Non-J	Derivative	Secui	rities Acqu	ired, Disposed of,	or Beneficial	v Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		emed 3. 4. Securities A on Date, if Transactionor Disposed o Code (Instr. 3, 4 and /Day/Year) (Instr. 8)		es Ac ed of (	quired (A) (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	OwnershipIndireForm:BenefDirect (D)Owner	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common	09/10/2010		Code V M	Amount 20,000	or (D) A	Price \$ 24.27	(Instr. 3 and 4) 229,901	D	
Shares Common Shares	09/10/2010		S <u>(1)</u>	20,000	D	\$ 53.0847 (2)	209,901	D	

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Options (right to buy)	\$ 24.27	09/10/2010		М	20,000	11/21/2002 <u>(3)</u>	11/21/2011	Common Shares	20,0

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director 10% Owner Officer	Officer	Other			
Carmilani Scott A ALLIED WORLD ASSURANCE CO HOLDINGS, LTD 27 RICHMOND ROAD PEMBROKE, D0 HM 08	X		President, CEO and Chrmn of Bd			
Signatures						
/s/ Wayne H. Datz, by Power of	2010					

 Attorney
 09/14/2010

 \*\*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) The exercise of Employee Stock Options and sale of Common Shares reported in this Form 4 were for tax purposes and were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 11, 2010.
- (2) Represents a weighted average sale price: the sales prices range from \$52.88 to \$53.19. Upon request, the full sale information regarding the number of shares sold at each price increment will be provided to the Commission, the issuer or a security holder of the issuer.
- (3) These securities vested in four equal annual installments with the first installment vesting on the date shown.

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.