Edgar Filing: Amtrust Financial Services, Inc. - Form 4

Amtrust Financial Services, Inc. Form 4 March 20, 2014

March 20, 2	014											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				NGES IN SECUF		ICIA	L OWN	NERSHIP OF	Expires: Estimated a burden hou response			
Form 5 obligations may continue. See Instruction 1(b). 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												
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> MILLER JAY J			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			Amtrus [AFSI]	st Financia	al Service	es, Ind	с.	(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X_ Director 10% Owner Officer (give title Other (specify below) below)				
	RUST FINANCIA 5, INC., 59 MAIE RD FLOOR		03/20/2	2014				below)	below)			
				onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEW YORK, NY 10038								Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqu	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)		ion Date 2A. Deemed y/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	03/20/2014			Code V M	Amount 15,125	(D) A	Price \$ 5.7852	(Instr. 3 and 4) 18,645	D			
Reminder: Re	port on a separate lin	e for each cl	ass of secu	urities benef	ficially own	ned dir	ectly or ir	ndirectly.				

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	orDerivative		ative Expiration Date ities (Month/Day/Year) ired (A) sposed of . 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (1)	\$ 5.7852	03/20/2014		М		15,125	02/09/2007	02/09/2016	Common Stock	15,125

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Reporting Owners

N C

5 N S

**Signature of

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
MILLER JAY J C/O AMTRUST FINANCIAL SERVICES, INC. 59 MAIDEN LANE, 43RD FLOOR NEW YORK, NY 10038		Х					
Signatures							
/s/ Jay Miller	03/20/2014						

Reporting Person Explanation of Responses:

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

Date

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

Pursuant to the anti-dilution provisions in AmTrust Financial Services, Inc.'s 2010 Omnibus Incentive Plan, as amended, this option was previously reported as an option for 12,500 shares of common stock at an exercise price of \$7.00 per share, but was adjusted to reflect the 10% stock dividend declared by AmTrust Financial Services, Inc. on August 6, 2012 and payable on September 20, 2012 and the 10% stock dividend declared by AmTrust Financial Services, Inc. on August 6, 2013 and payable on September 4, 2013.

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.