### Edgar Filing: Global Indemnity plc - Form 4

Global Inder Form 4	nnity plc										
October 01,	2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D.C. 20549									APPROVAL 3235-0287		
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ger 5 16. 5 7 Filed pur ns 5 5 5 5 5 5 5 5 5 5 5 5 5	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</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							Expires:January 312005Estimated averageburden hours perresponse0.5		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person *2. IssuerHowes John HSymbol			er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
Globa				l Indemnity plc [GBLI]				(Check all applicable)			
3 BALA PLAZA EAST, SUITE 300 (Month/D (Street) 4. If Ame			(Month/D	9/30/2015				X Director Officer (give below)	10%	Owner er (specify	
			endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
BALA CYN	WYD, PA 19004	4						Form filed by M Person	fore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Class A Ordinary Shares	09/30/2015			А	1,106 (1)	А	\$ 26.06	13,451	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.

 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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	umber Expiration Date (Month/Day/Year) erivative ecurities cquired a) or isposed (D)		7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				4, and 5)	Date	Expiration	Title	Amount or Number		
			Code V	(A) (D)	Exercisable	Date		of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Howes John H 3 BALA PLAZA EAST, SUITE 300 BALA CYNWYD, PA 19004	Х						
Signatures							
/s/Stephen W. Ries Attorney-in-fact	10/01/2015						
<u>**</u> Signature of Reporting Person	Date	e					

# **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).

Represents the grant of 572 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 plc, and 534 shares of restricted A

(1) and versally of the award in recognition of service rendered as a board member to Global indennity pic, and 554 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 Group, Inc., an indirect wholly-owned subsidiary of the Issuer.

### **Remarks:**

#### See footnote page

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.