HCC INSURANCE HOLDINGS INC/DE/

Form 4

January 06, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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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 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Cook Barry J

2. Issuer Name and Ticker or Trading Symbol

Issuer

below)

HCC INSURANCE HOLDINGS

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last)

(First) (Middle)

3. Date of Earliest Transaction

Director X_ Officer (give title

10% Owner Other (specify

Indirect

Beneficial

Ownership

(Instr. 4)

WALSINGHAM HOUSE

35, SEETHING LAN

01/04/2006

Senior Vice President

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

INC/DE/ [HCC]

(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

LONDON, X0 EC3N 4AH

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 2. Transaction Date 2A. Deemed 1. Title of Security (Month/Day/Year) Execution Date, if

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Beneficially (D) or Owned Indirect (I) Following (Instr. 4)

Reported

(A) Transaction(s) or (Instr. 3 and 4)

Common

(Instr. 3)

Code V Amount (D) Price

 $7,050^{(1)}$ D

Stock

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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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. Transactic 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 of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
Option to Purchase	\$ 16.8					(3)	01/24/2008	Common Stock	37,500
Option to Purchase	\$ 14.97					<u>(4)</u>	10/09/2008	Common Stock	150,000
Option to Purchase (5)	\$ 25.88					<u>(6)</u>	07/22/2011	Common Stock	100,000
Option to Purchase (5)	\$ 30.05	01/04/2006		A	100,000	<u>(7)</u>	01/04/2012	Common Stock	100,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		

Cook Barry J WALSINGHAM HOUSE 35 SEETHING LAN LONDON, X0 EC3N 4AH

Senior Vice President

Signatures

Christopher L. Martin as Attorney-in-Fact for Barry J.
Cook
01/06/2006

**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) Reflects stock split of 07/05.
- (2) Option to purchase granted pursuant to the 2001 Flexible Stock Option Plan.
- (3) Options vest equally annually over a 5 year period beginning 01/24/03.
- (4) Options vest equally annually over a 5 year period beginning 10/09/03.
- (5) Option to purchase granted pursuant to the 2004 Flexible Incentive Plan.
- (6) Options vest equally annually over a 5 year period beginning 07/22/06.

Reporting Owners 2

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(7) Options vest equally annually over a 5 year period beginning 01/04/07.

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.