## Edgar Filing: HCC INSURANCE HOLDINGS INC/DE/ - Form 4

HCC INSURANCE HOLDINGS INC/DE/ Form 4 March 31, 2006 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading WAY STEPHEN L Issuer Symbol HCC INSURANCE HOLDINGS (Check all applicable) INC/DE/ [HCC] \_X\_ Director (Last) (First) (Middle) 3. Date of Earliest Transaction 10% Owner X\_Officer (give title Other (specify (Month/Day/Year) below) below) 13403 NORTHWEST FREEWAY 03/29/2006 Chairman of the Board and CEO (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting HOUSTON, TX 77040 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 7. Nature of 6. Security (Month/Day/Year) Execution Date, if TransactionDisposed of (D) Securities Ownership Indirect (Instr. 3) any Code (Instr. 3, 4 and 5) Beneficially Form: Beneficial Ownership (Month/Day/Year) Owned Direct (D) (Instr. 8) Following or Indirect (Instr. 4) Reported (T)(A) (Instr. 4) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Common 03/08/2006 G V 17,500 D \$ 32.04 2,982,500 D Stock Common 03/29/2006 S 47,500 D 2,935,000 D 34.6575 Stock Common 03/30/2006 S 100,000 D \$ 34.4 2,835,000 D Stock Common S 03/31/2006 202.500 D 2,632,500 D 34.6135 Stock

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

SEC 1474 Persons who respond to the collection of 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)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactiv	5. onNumber	6. Date Exer Expiration D		7. Title and A Underlying S		8. Pr Deriv
Security	or Exercise	(Wonth Day Tear)	any	Code	of	(Month/Day/		(Instr. 3 and		Secu
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Purchase $(1)$	\$ 25.88					(2)	07/22/2011	Common Stock	600,000	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>									
	Director	10% Owner	Officer	Other					
WAY STEPHEN L 13403 NORTHWEST FREEWAY HOUSTON, TX 77040	Х		Chairman of the Board and CEO						
Signatures									
Christopher L. Martin as Attorney-i Way	03/31/2006								

\*\*Signature of Reporting Person

## **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) Option to purchase granted pursuant to the 2004 Flexible Incentive Plan.
- (2) Options vest at 200,000 shares per year, over a three year period.

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.

Date