Edgar Filing: DiSipio Christopher N. - Form 4

DiSipio Christopher N. Form 4										
December 08, 2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COM							COMMISSION		PPROVAL 3235-0287	
Section 16. Form 4 or Form 5 Filed	F CHANG Section 16 Public Uti	 Ashington, D.C. 20549 NGES IN BENEFICIAL OWNERSHIP OF SECURITIES 16(a) of the Securities Exchange Act of 1934, Utility Holding Company Act of 1935 or Section Investment Company Act of 1940 					Expires: January 31 2009 Estimated average burden hours per response 0.5			
(Print or Type Responses)										
DiSipio Christopher N. Syn A2			2. Issuer Name and Ticker or Trading Symbol AXIS CAPITAL HOLDINGS LTD [AXS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Dat (Mont			Date of Earliest Transaction Ionth/Day/Year) 2/06/2017				Director 10% Owner X_ Officer (give title Other (specify below) below) CEO, Accident & Health			
(Street)	(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				
PRINCETON, NJ 08540							Form filed by I Person	More than One Re	eporting	
(City) (State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of 2. Transaction Security (Month/Day/Y (Instr. 3)	any	emed on Date, if 'Day/Year)	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares 12/06/2017			А	4,912 (1)	A	\$0	87,370	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	Number Expiration Date f (Month/Day/Year) Derivative ecurities acquired A) or Disposed f		Under Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
DiSipio Christopher N. 1 UNIVERSITY SQUARE DRIVE SUITE 200 PRINCETON, NJ 08540			CEO, Accident & Health	
Signatures				
G. Christina Gray-Trefry, Attorney-in-Fact		12/08/201	7	
**Signature of Reporting Person		Date		
Explanation of Poon	ancor			

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).

On December 6, 2017, the Company's Compensation Committee determined satisfaction of performance criteria for performance-based restricted stock units granted on February 3, 2015. This amount represents additional performance-based restricted stock units that have been earned pursuant to the award in addition to the guaranteed minimum payout of 701 restricted stock units which were previously reported on February 5, 2015. The restricted stock units will vest in a single installment on March 1, 2018.

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.