Edgar Filing: AMERICAN SAFETY INSURANCE HOLDINGS LTD - Form 4

AMERICAN Form 4 June 29, 200	SAFETY INS	URANCE	HOLDIN	IGS LTD	I						
									OMB AF	PROVAL	
FORM	I 4 UNITED	STATES					NGE C	COMMISSION	OMB Number:	3235-0287	
Check the		Washington, D.C. 20549								January 31,	
if no longer subject to Section 16. Form 4 or				SECUR	ITIES				Expires: 20 Estimated average burden hours per response		
Form 5 obligation may cont See Instru 1(b).	ns inue. Section 17	(a) of the		ility Hold	ling Con	npany	y Act of	e Act of 1934, 71935 or Section 40	1		
(Print or Type F	Responses)										
MUELLER THOMAS W Sy A IN			Symbol	-				5. Relationship of Reporting Person(s) to Issuer			
			AMERICAN SAFETY INSURANCE HOLDINGS LTD [ASI]					(Check all applicable)10% Owner			
(Last)	(First) TMAIN STREE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/29/2007			Officer (give titleOther (specify below) below)					
	(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					
LOUISVILLE, KY 40203							Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
(Instr. 3) any Cod		Transactio	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common Shares				Code V	Amount	(D)	Price		I	See Footnote $(1) \frac{(1)}{2}$	
Common Shares								160,000	I	See Footnote (2) $\frac{(2)}{2}$	
Common Shares	06/27/2007	06/27/2	2007	А	1,847	А	\$ 16.24	10,469	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)	of		ate	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
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MUELLER THOMAS W 1300 WEST MAIN STREET LOUISVILLE, KY 40203	Х						
Signatures							
Thomas W.	7002007						

Mueller	06/29/2007
<u>**</u> 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) As Trustee of Mark C. Mueller Trust
- (2) Shares held by Thomas W. Mueller Trust

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.