## Edgar Filing: Caviet Max G - Form 4

Caviet Max G					
Form 4					
October 29, 2007					
FORM 4 UNITED STAT	TES SECURITIES AND EXCHANGE Washington, D.C. 20549	COMMISSION	OMB APPROVAL OMB 3235-0287 Number:		
Subject to Section 16. Form 4 or Form 5 obligations may continue. Filed pursuant Section 17(a) of	T OF CHANGES IN BENEFICIAL OV SECURITIES to Section 16(a) of the Securities Excha the Public Utility Holding Company Act 0(h) of the Investment Company Act of 1	nge Act of 1934, of 1935 or Sectior	January 31 Expires: 2005 Estimated average burden hours per response 0.5		
(Print or Type Responses)					
1. Name and Address of Reporting Person Caviet Max G	<ul> <li>2. Issuer Name and Ticker or Trading Symbol</li> <li>Amtrust Financial Services, Inc.</li> <li>[AFSI]</li> </ul>	Issuer	Reporting Person(s) to c all applicable)		
(Last) (First) (Middle) C/O AMTRUST FINANCIAL SERVICES, INC., 59 MAIDEN LANE, 6TH FLOOR	3. Date of Earliest Transaction (Month/Day/Year) 10/25/2007	below)	ittle 10% Owner X Other (specify below) ent of Subsidiary		
(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 Form filed by More than One Reporting			
NEW YORK, NY 10038		Person			
(City) (State) (Zip)	Table I - Non-Derivative Securities A	cquired, Disposed of,	or Beneficially Owned		
(Instr. 3) any	Deemed 3. 4. Securities ation Date, if TransactionAcquired (A) or Code Disposed of (D) th/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	SecuritiesForBeneficially(II)Owned(II)	Ownership7. Nature oform: DirectIndirectD) or IndirectBeneficial)Ownershipnstr. 4)(Instr. 4)		
Reminder: Report on a separate line for ea	ch class of securities beneficially owned directly	or indirectly.			

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 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. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3		7. Title and A Underlying S (Instr. 3 and	Securities	8. De Se (Ir
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$7					02/09/2007(1)	02/09/2016	Common Stock	62,500	
Stock Option	\$ 7.5					09/01/2007 <u>(2)</u>	09/01/2016	Common Stock	50,000	
Stock Option	\$ 14.55	10/24/2007		А	0	10/24/2008(3)	10/24/2017	Common Stock	50,000	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships			
	Director	10% Owner	Officer	Other
Caviet Max G C/O AMTRUST FINANCIAL SERVICES, INC. 59 MAIDEN LANE, 6TH FLOOR NEW YORK, NY 10038				President of Subsidiary
Signatures				

## ignatures

/s/ Max Caviet 10/25/2007 \*\*Signature of Date

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).
- Stock options vest as follows: 25% of the options granted to the Reporting Person under the 2005 Equity Incentive Plan vest on February (1) 9, 2007. The remaining 75% of the options vest pro rata quarterly over the three-year period following February 9, 2007.
- Stock options vest as follows: 25% of the options granted to the Reporting Person under the 2005 Equity Incentive Plan vest on (2)September 1, 2007. The remaining 75% of the options vest pro rata quarterly over the three-year period following September 1, 2007.
- Stock options vest as follows: 25% of the options granted to the Reporting Person under the 2005 Equity Incentive Plan vest on October (3) 24, 2008. The remaining 75% of the options vest pro rata quarterly over the three-year period following October 24, 2008.

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.