FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
-------------	------	-------	--

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response	: 0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     METZ LAWRENCE F.					2. Issuer Name <b>and</b> Ticker or Trading Symbol Maiden Holdings, Ltd. [MHLD]									all app Direc		ng Per	10% O	wner			
(Last)		(First	t) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/17/2023							X	below	er (give title	Г&(	Other (below)	specify			
94 PITTS BAY ROAD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	OKE	D0	Н	IM 08												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)		(Stat	e) (Z	Zip)		Rule 10b5-1(c) Transaction Indication							t to o								
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											nided to									
			Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	efici	ally (	Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execution Date,				s Acquired (A) o of (D) (Instr. 3, 4 a			and Securit Benefit Owned		ties cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A (C	A) or D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Shares				03/17/2	2023				A		112,745(1	1) <b>A</b>		\$(	\$0 1,6		669,444		D	
Common	Shares				03/17/2	2023				F		53,836(2)	D :		\$2.	\$2.3 1,6		615,608		D	
Restricted Common Shares 03/17/2					2023				A		169,565	65 <sup>(3)</sup> A		\$(	\$0 16		169,565		D		
	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)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any				nsaction de (Instr.		vative vative urities uired or osed v) r. 3, 4	6. Date Exert Expiration D (Month/Day/		ate ear)	or Nun		f g	8. Pri Deriv Secu (Instr	ative rity	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code V (A) (D)			Date Exercis	able	Expiration Date Title Share:		ires								

## **Explanation of Responses:**

- 1. These common shares were granted pursuant to the 2019 Omnibus Incentive Plan with immediate vesting.
- 2. Disposition of common shares resulting from withholding of securities for the payment of tax liability relating to the grant described in footnote 1.
- 3. The restricted shares were issued on March 17, 2023 pursuant to the 2019 Omnibus Incentive Plan, and will vest 50% on the first anniversary and 50% on the second anniversary.

## Remarks:

President & Co-Chief Executive Officer

03/21/2023 /s/ Lawrence F. Metz

\*\* Signature of Reporting Person Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.