FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB A	OMB APPROVAL							
OMB Number: 3235-0104								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Blanchard Holly Lynn		2. Date of Event Requiring Statement (Month/Day/Year) 12/10/2019  3. Issuer Name and Ticker or Trading Symbol Maiden Holdings, Ltd. [ MHLD ]									
	C/O MAIDEN HOLDINGS, LTD.				4. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)		
94 PITTS BAY RD, IDEATION HOUSE 2ND FL.		ON HOUSE			Officer (give title below)		Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person		
(Street) PEMBROKE	D0	HM08							A	•	y More than One
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
		Т	able I - Non	-Derivati	ive Se	curities Beneficiall	y Owned				
1. Title of Securi	ty (Instr. 4)	T	able I - Non	2.	. Amou	ecurities Beneficiall nt of Securities ally Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	ct (D)   (	4. Natu (Instr. !		Beneficial Ownership
1. Title of Securi	ty (Instr. 4)		Table II - D	2. Be	Amou enefici	nt of Securities	3. Ownersh Form: Direct or Indirect (Instr. 5)	et (D) ( (I)			Beneficial Ownership
Title of Securi     Title of Deriva	,	(e.ç	Table II - D	erivative s, warrai	Secunts, o	nt of Securities ally Owned (Instr. 4) urities Beneficially (	3. Ownersh Form: Direct or Indirect (Instr. 5) Owned securitie	et (D) ( (I)	sion cise		Beneficial Ownership  6. Nature of Indirect Beneficial Ownership (Instr. 5)

**Explanation of Responses:** 

Remarks:

No securities are beneficially owned.

/s/ HOLLY LYNN 12/17/2019 **BLANCHARD** 

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).