DiMaggio Le	slie									
Form 4	2017									
November 21	_								PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287	
							irs per			
(Print or Type R	esponses)									
1. Name and Address of Reporting Person <u>*</u> DiMaggio Leslie			2. Issuer Name <b>and</b> Ticker or Trading Symbol Atlas Financial Holdings, Inc. [AFH]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 715 BARBERRY TRAIL			3. Date of Earliest Transaction (Month/Day/Year) 11/17/2017				<ul> <li>(Check all applicable)</li> <li>Director</li> <li>Officer (give titleX_ Other (specify below)</li> <li>Subsidiary Director/Officer</li> </ul>			
			4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
FOX RIVER	GROVE, IL 600	21					Form filed by N Form filed by N Person			
(City)	(State) (2	Zip) 7	able I - Non-D	erivative s	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code ear) (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	d (A) of d of (D 4 and (A) or	))	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	11/17/2017		S	293	D	\$ 19 (1)	86,009	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)

## Edgar Filing: DiMaggio Leslie - Form 4

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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	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**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
DiMaggio Leslie 715 BARBERRY TRAIL FOX RIVER GROVE, IL 60021				Subsidiary Director/Officer			

## **Signatures**

<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) Average Price

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.