

ACE LTD Reported by MENDOZA ROBERTO G

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/07/00 for the Period Ending 12/31/99

Telephone 441 295 5200

CIK 0000896159

Symbol ACE

SIC Code 6331 - Fire, Marine, and Casualty Insurance

Industry Insurance (Prop. & Casualty)

Sector Financial

Fiscal Year 12/31



ACE LTD

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 1/7/2000 For Period Ending 12/31/1999

Address ACE BLDG 30 WOODBOURNE AVE

HAMILTON HM 08 BERMU, 00000

Telephone 809-295-5200

CIK 0000896159

Industry Insurance (Prop. & Casualty)

Sector Financial

Fiscal Year 12/31



OMB APPROVAL

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U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

[x] Form filed by one Reporting Person

[] Form filed by more than one Reporting Person

1. Name and Address	s of Reporting Person*		
		MENDOZA Roberto G.	
(Last) (First) (Middle	e) c/o J.P. Morgan & Co. Inc	orporated 60 Wall Street	
	New York	(Street) New York	10260
	(City)	(State)	(Zip)
_			
2. Issuer Name and T	Ficker or Trading Symbol		
ACE Limited (NYSE		n, if an Entity (Voluntary)	
ACE Limited (NYSE	E: ACL) Number of Reporting Persor	n, if an Entity (Voluntary)	
ACE Limited (NYSE	E: ACL) Number of Reporting Persor	n, if an Entity (Voluntary) December 1999	
ACE Limited (NYSE 3. IRS Identification 4. Statement for Mor	E: ACL) Number of Reporting Persor	December 1999	
ACE Limited (NYSE 3. IRS Identification 4. Statement for Mor 5. If Amendment, Da	E: ACL) Number of Reporting Person nth/Year ate of Original (Month/Year)	December 1999	
ACE Limited (NYSE 3. IRS Identification 4. Statement for Mor 5. If Amendment, Da 6. Relationship of Re	E: ACL) Number of Reporting Person hth/Year ate of Original (Month/Year) eporting Person to Issuer	December 1999	
ACE Limited (NYSE 3. IRS Identification 4. Statement for Mor 5. If Amendment, Da 6. Relationship of Re (Check all applicable [x] Director [] 10%	Number of Reporting Person hth/Year ate of Original (Month/Year) eporting Person to Issuer e)	December 1999	

Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

2.		3. Transaction Code		4. Securities Ac Disposed of (D) and 5)		5. Amount of Securities Beneficially Owned at End		7. Nature of Indirect
1. Title of Security	Transaction Date	(Instr.			(A) or		of Month (Instr. 3	Indirect	Beneficial Ownership
(Instr. 3)	(mm/dd/yy)	Code	V		(D)		and 4)	(Instr.4) 	(Instr. 4)
Ordinary Shares	11/19/99	A(1)	V	389	A	(1)			
Ordinary Shares	11/19/99	A(1)	V		A	(1)			
Ordinary Shares	12/15/99			1,000					
Ordinary Shares	12/15/99						5,855	D	
				========		=======			=======

^{*} If the Form is filed by more than one Reporting Person, see Instruction 4(b)(v).

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

(Print or Type Responses)

(Over)

(Form 4-07/98)

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. Trans- action Date (Month/ Day/ Year)		5. Number of Derivative Securities Acquired (A) or Disposed of(D) (Instr. 3, 4 and 5) (A) (D)	Expirat: (Month/I	ion Date Day/Year) Expira- tion		lying es	Deriv- ative Secur- ity (Instr.	9. Number of Deriv- ative Secur- ities Bene- ficially Owned at End of Month (Instr. 4)	(D) or In- direct (I)	11. Nature of In- direct Bene- ficial Owner- ship (Instr. 4)
=======================================	=======		.======			=======			=======	.=======		======
Explanation of Res	ponses:											
(1) Represents Ord "Plan"), which Ordinary Share	plan meet	ts the req	quirements	s of Rule 16b-3	3. The re							
Signed for Roberto G. Mendoza pursuant to a power of attorney on file with the Securities and Exchange Commission												
/s/ Peter Mear							January	5, 2000)			
**Signature of Reporting Person								Date				

** 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 provided is insufficient, see Instruction 6 for procedure.

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End of Filing



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