

ACE LTD Reported by CIRILLO MARY A

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 07/16/08 for the Period Ending 07/14/08

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





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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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

1. Name and Address of Reporting Person *				* 2	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CIRILLO MA	ARY A			A	ACE	LTD [ACE]									
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							X Director 10% Owner					
535 FIFTH AVENUE, 14TH					7/14/2008							below)	r (give title l	pelow) _	Other (specify	
FLOOR (Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW YORK, NY 10017 (City) (State) (Zip)												_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	ole I - Non	-Deriv	vativ	e Securi	ties Acq	ui	red, Di	spos	sed (of, or I	Beneficially	y Owned			
1			2. Tr Date		2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securi Acquired Disposed (Instr. 3,	(A) of ((A) or Followi of (D) (Instr. 3		ing Reported Transaction(s)			Ownership Form: Direct (D)	Beneficial Ownership	
						any	Code	V	Amount	(A) or (D)	Price	e				or Indirect (I) (Instr. 4)	(Instr. 4)
Ordinary Shares				7/14	/2008		A (1)		4164.97	A	(1)		11023	3.95 ⁽²⁾		D	
Tab	ole II - De	rivati	ive Securi	ties Bo	enefic	cially Ov	wned (e	.g.	, puts,	cal	ls, w	varran	ts, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	ccurity Conversion Trans. Deemed Trans. str. 3) or Exercise Date Execution Code			Code	Deriva Securi Acqui Dispo	ative	and Expiration Date			7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)			ng Deriv Secur (Instr	Derivative	derivative	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial
				Code V	(A)	(D)	Exercisabl	- 1		Titl	ا ما	nount or I	Number of		(s) (Instr. 4)		

Explanation of Responses:

- (1) Stock units, representing the right to receive Ordinary Shares, granted as director fees under the ACE Limited 2004 Long-Term Incentive Plan (the "Plan"), which meets the requirements of Rule 16b-3. Such stock units will be fully vested as of the date of the next annual ACE Limited shareholders meeting, assuming the reporting person is a director of ACE Limited on such date. Ordinary Shares will be issued for such stock units six months after the Director's termination from the Board or pursuant to such later deferral schedule as the director may elect.
- (2) Total includes 121.52 share units credited at various times between July 2007 and April 2008 to the reporting person's deferred stock account pursuant to the dividend reinvestment provisions of the Plan which meets the requirements of Rule 16b-3.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
CIRILLO MARY A 535 FIFTH AVENUE, 14TH FLOOR	X							
NEW YORK, NY 10017								

Signatures

By: Lori Samson, Attorney-in-fact

7/15/2008

** 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 control number.