## Edgar Filing: KNAP TONY - Form 4

KNAP TON	NΥ										
Form 4											
April 15, 20	)09										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box				· ····································					Expires:	January 31	
if no lor subject		AENT O	F CHAI	HANGES IN BENEFICIAL OWNERSHIP OF					· ·	2005 average	
Section				SECUE	RITIES				Estimated average burden hours per		
Form 4 Form 5	Form 4 or						response	. 0.5			
obligati								nge Act of 1934,			
may cor	ntinue. Section 17(			nvestment	•	· ·	•	of 1935 or Section	JII		
<i>See</i> Inst 1(b).	ruction	50(II)	or the f	nvestment	Compa	1y 7 10		740			
1(0).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading				ng	5. Relationship of Reporting Person(s) to			
KNAP TO	Symbol				_	Issuer					
			Flagstone Reinsurance Holdings Ltd [FSR]				gs Lto	(Check all applicable)			
(Last)	(First) (	Middle)	3. Date of	of Earliest T	ransaction			XDirector		% Owner	
				Day/Year)				Officer (giv below)	e title Oth below)	ner (specify	
	NE REINSURAN S LIMITED, 23	NCE	04/13/2	2009							
CHURCH											
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)					Applicable Line)			
			× ·	ý	,			_X_ Form filed by			
HAMILTC	N, D0 HM 11							Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Secur	rities A	cquired, Disposed o	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit	ies		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Code Disposed of (D)			Beneficially (1	orm: Direct			
(Instr. 3)								(D) or Indirect (I)	Ownership		
		(		(				Following	Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or	D .	(Instr. 3 and 4)			
				Code V	Amount	(D)	Price				
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities benef	ficially ow	ned di	rectly o	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)

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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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Share Units	\$ 0 <u>(2)</u>	04/13/2009		А	7,164	04/13/2009(1)	(3)	Common Shares	7,164

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
KNAP TONY FLAGSTONE REINSURANCE HOLDINGS LIMITED 23 CHURCH STREET HAMILTON, D0 HM 11	Х					
Signatures						
/s/ William F. Fawcett (pursuant to power of attorney)	04/15/2	2009				
<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) The Restricted Share Units ("RSUs") vest 100% on the date of the grant.

Each RSU represents the right to receive without payment to the Company, one newly-issued, fully paid and non-assessable common share of the Company, subject to the terms and conditions of the RSU Plan and the grant certificate evidencing each grant. In the

- (2) share of the company, subject to the terms and conditions of the RSU grant alternatively may be paid in cash, or partly in common shares.
- (3) The RSUs have no expiration date.

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.