Edgar Filing: KNAP TONY - Form 4

KNAP TO Form 4	NY									
April 30, 20	010									
FOR	Л Д								PPROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287		
	Check this box if no longer CTLATED VENTE OF CHANGES IN DEDUFFICIAL ON DEDGING OF						Expires:	January 31, 2005		
subject to Section 16. Form 4 or				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES				Estimated average burden hours per response		
Form 5 obligati may co <i>See</i> Ins 1(b).	ions Section 17	7(a) of the P	ublic U	Itility Hol	ding Co		nge Act of 1934, of 1935 or Sectio 940	on		
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u>*</u> KNAP TONY			2. Issuer Name and Ticker or Trading Symbol Flagstone Reinsurance Holdings Ltd			5. Relationship of Reporting Person(s) to Issuer d (Check all applicable)				
			[FSR]							
(Last)	(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			_X_Director10% Owner Officer (give titleOther (specify below) below)			
HOLDING LIMITED	ONE REINSURA GS , CRAWFORD H CH STREET		04/28/2	2010				below)		
(Street) 4. If Amendment, Date Filed(Month/Day/Year)				-	al	Applicable Line) _X_ Form filed by Form filed by I	oint/Group Filing(Check One Reporting Person More than One Reporting			
		(7:n)					Person			
(City)	(State)	(Zip)					Acquired, Disposed of			
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deen (Month/Day/Year) Execution any (Month/D		Date, if TransactionA Code D		4. Securi nAcquired Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A)	Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect	
				Code V	Amount	or (D) Price	(Instr. 3 and 4)			
Reminder: Re	eport on a separate li	ne for each clas	ss of sec	urities bene	ficially ow	ned directly	or indirectly.			
					inforı requi	nation cont red to resp ays a curre	spond to the collec tained in this form ond unless the for ntly valid OMB con	are not m	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: KNAP TONY - 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. Transacti 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>(1)</u>	04/28/2010		А	6,398	04/28/2010(2)	(3)	Common shares	6,398

Reporting Owners

Reporting Owner Name / Address		Relationships					
r g	Di	rector	10% Owner	Officer	Other		
KNAP TONY FLAGSTONE REINSURANCE HOLDINGS LIN CRAWFORD HOUSE, 23 CHURCH STREET HAMILTON, D0 HM 11	MITED	X					
Signatures							
/s/ William F. Fawcett, by power of attorney	04/29/2010						
**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).

Each Restricted Share Unit ("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 grant certificate evidencing each

- (1) In the discretion of the Company, subject to the terms and conditions of the KSO Fian and grant certificate evidencing each grant. In the discretion of the Compensation Committee, upon exercise, the RSU grant may alternatively be paid in cash or partly in cash and partly in common shares.
- (2) The RSUs vest 100% on the date of the grant.
- (3) The RSUs have no expiry 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.