Edgar Filing: Flagstone Reinsurance Holdings Ltd - Form 4

Flagstone Reinsurance Holdings Ltd Form 4 March 14, 2008

March 14, 2008								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION						OMB APPROVAL		
UNITED			AND EXCHANGE , D.C. 20549	COMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934.						January 31Expires:2001Estimated averageburden hours perresponse0.5		
obligations may continue. See Instruction 1(b).			ding Company Act Company Act of 19		1			
(Print or Type Responses)								
1. Name and Address of Reporting DICKSON THOMAS	Symbol		I Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
	Flagst [FSR]	one Reinsu	rance Holdings Ltd	(Check	k all applicable	e)		
	(Month/	ransaction	XDirector10% Owner Officer (give titleOther (specify below)below)					
FLAGSTONE REINSURAN HOLDINGS LIMITED, CRAWFORD HO 23 CHURCH STREET		2008						
(Street)	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 							
HAMILTON, D0 HM 11				Form filed by M Person	ore than One R	eporting		
(City) (State)	(Zip) Ta	ble I - Non-E	Derivative Securities A	cquired, Disposed of	, or Beneficia	lly Owned		
1.Title of 2. Transaction Date Security (Month/Day/Year) (Instr. 3)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code	4. Securities nAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price	SecuritiesFeBeneficially(IOwned(I	Ownership form: Direct D) or Indirect) nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on a separate line	e for each class of sec	curities benef	icially owned directly o	r indirectly.				
			information conta required to respo	pond to the collect ained in this form a ond unless the forn atly valid OMB cont	are not 1	SEC 1474 (9-02)		

 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. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 3		5. Numb nof Deriv Securitie Acquired (A) or Disposed (D) (Instr. 3, and 5)	ative es d d of	6. Date Exercisable and Expiration Date Underlying Secu (Month/Day/Year) (Instr. 3 and 4)		Securities	8. Pr Deriv Secu (Inst	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Share Units	<u>(1)</u>	03/13/2008		А		2,985		<u>(1)</u>	(1)	Common Shares	2,985	\$ (
Reporting Owners												
Reporting Owner Name / Address			Relationships									
			Direct	tor	10% O	wner	Officer C	Other				
DICKSON THOMAS FLAGSTONE REINSURANCE HOLDINGS LIMITED CRAWFORD HOUSE, 23 CHURCH STREET HAMILTON, D0 HM 11		Х										
Signat	ures											
/s/ Todd White (on behalf of Thomas Dickson pursuant to power o attorney)				r o	f		03/14/	/2008				
**Signature of Reporting Person				Date								

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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 cash and partly in common shares.

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.