

SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL	
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>STILWELL JOSEPH</u> <hr/> (Last) (First) (Middle) <u>111 BROADWAY, 12TH FLOOR</u> <hr/> (Street) <u>NEW YORK NY 10006</u> <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>01/01/2012</u>	3. Issuer Name and Ticker or Trading Symbol <u>KINGSWAY FINANCIAL SERVICES INC [KFS]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	8,840,422 ⁽¹⁾	D	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Call Option (Obligation to Sell)	⁽²⁾	01/07/2016	Common Stock	100,000	5.68	D ⁽³⁾	
Call Option (Obligation to Sell)	⁽²⁾	01/07/2016	Common Stock	100,000	13	D ⁽⁴⁾	

1. Name and Address of Reporting Person* <u>STILWELL JOSEPH</u> <hr/> (Last) (First) (Middle) <u>111 BROADWAY, 12TH FLOOR</u> <hr/> (Street) <u>NEW YORK NY 10006</u>
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(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
Stilwell Value LLC		
(Last)	(First)	(Middle)
111 SW BROADWAY, 12TH FLOOR		
(Street)		
NEW YORK	NY	10006
(City)	(State)	(Zip)

Explanation of Responses:

1. Joseph Stilwell, Stilwell Value Partners III, L.P., Stilwell Value Partners IV, L.P., Stilwell Associates, L.P., and Stilwell Associates Insurance Fund of the S.A.L.I. Multi-Series Fund L.P. directly own 500,000; 3,000,000; 3,000,000; 2,105,479; and 234,943 shares of common stock, respectively. The aggregate shares reported are owned indirectly by all reporting owners through Joseph Stilwell's capacities as the managing member and 99% owner of Stilwell Value LLC, which is the general partner of Stilwell Value Partners III, Stilwell Value Partners IV, and Stilwell Associates, and the managing and sole member of Stilwell Advisers LLC, which provides investment advice to Stilwell SALI Fund.
2. The option becomes exercisable in five equal annual installments beginning January 7, 2010.
3. Pursuant to an option agreement between Stilwell Value Partners III, L.P. and Spencer Schneider.
4. Pursuant to an option agreement between Stilwell Associates, L.P. and Spencer Schneider.

[/s/ Joseph David Stilwell](#) [01/03/2012](#)

[/s/ Joseph Stilwell, Managing Member of Stilwell Value LLC](#) [01/03/2012](#)

** 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 5 (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 Number.