SEC FORM 4 6/24/13

SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 December 31, 2014 Estimated av erage burden

			File							npany Act o			934		respo	onse:		0.5		
1. Name and Address of Reporting Person* STILWELL JOSEPH					2. Issuer Name and Ticker or Trading Symbol KINGSWAY FINANCIAL SERVICES INC [KFS]								Chec	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) (First) (Middle) 111 BROADWAY, 12TH FLOOR				3. E 06/	3. Date of Earliest Transaction (Month/Day/Year) 06/17/2013									Officer (give title Other (specify below) below)						
(Street) NEW YORK NY 10006				_ 4. I1	If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting						
(City) (State) (Zip)															Person					
4 Title of 0	Security (Inc		I - Non-Deri		_	ecurit		quired,	, Dis	1				<u> </u>	ned	ا د ما	wnership	7. Nature		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date, if any (Month/Day/Year)		, Transa Code		4. Securities Acquired (Disposed Of (D) (Instr. and 5)				Securi Benefi Owned	ties cially I	Forn (D) o	n: Direct or ect (I)	of Indirect Beneficial Ownership (Instr. 4)		
									v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)						
Common Stock 06/17/2				7/2013	2013			P		312		A	\$3.4 2,5		4,212 ⁽¹⁾ ⁽²⁾	(2) D				
		Tat	ole II - Deriva (e.g.,							sed of, onvertib				Owne	d					
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/Yea	Code	Transaction Code (Instr		on Number		Exerc ion Da /Day/Y		Amo Secu Und Deri Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
				Code	e \	V (A) (D)	Date Exercis	able	Expiration Date	Title	or Nur of	nber ires							
	nd Address o	f Reporting Person	*																	
(Last) 111 BRO	ADWAY,	(First)	(Middle)																	
(Street) NEW YORK		NY	10006																	
(City)		(State)	(Zip)																	
	nd Address o Value LL	f Reporting Person	*																	
(Last)	BROADWA	(First) AY, 12TH FLOOF	(Middle)																	
(Street)	NDIV.	NIV	10006																	

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Explanation of Responses:

1. Total reflects four-for-one share consolidation effected by the Company on July 3, 2012.

2. Joseph Stilwell, Stilwell Value Partners III, L.P., Stilwell Value Partners IV, L.P., Stilwell Associates, L.P., Stilwell Associates Insurance Fund of the S.A.L.I. Multi-Series Fund L.P., Stilwell Activist Investments LP, and Stilwell Activist Fund LP directly own 125,000; 515,000; 750,000; 702,044; 75,001; 307,068; and 30,100 shares of common stock. The aggregate shares 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, Stilwell Activist Investments LP, and Stilwell Activist Fund LP and the managing and sole member of Stilwell Advisers LLC, which provides investment advice to Stilwell SALI Fund.

Remarks:

Ninette Voiles, by power of attorney 06/19/2013

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).