

Campbell Nicholas J. D.
 Form 3
 January 05, 2018

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,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Â Campbell Nicholas J. D. (Last) (First) (Middle)	2. Date of Event Requiring Statement (Month/Day/Year) 12/29/2017	3. Issuer Name and Ticker or Trading Symbol Third Point Reinsurance Ltd. [TPRE]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Chief Risk Officer	5. If Amendment, Date Original Filed(Month/Day/Year)
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C/O THIRD POINT REINSURANCE LTD., Â POINT HOUSE, 3 WATERLOO LANE
 (Street)

 PEMBROKE, Â D0Â HM 08
 (City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 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 Shares	89,065 ⁽¹⁾	D	Â

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

SEC 1473 (7-02)

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 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	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
Options	Â (2)	12/17/2023	Common Shares	209,302	\$ 15.05	D	Â
Options	Â (2)	12/17/2023	Common Shares	69,768	\$ 21.05	D	Â
Options	Â (2)	12/17/2023	Common Shares	69,768	\$ 25.05	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Campbell Nicholas J. D. C/O THIRD POINT REINSURANCE LTD. POINT HOUSE, 3 WATERLOO LANE PEMBROKE,Â D0Â HM 08	Â	Â	Â Chief Risk Officer	Â

Signatures

/s/ Janice Weidenborner, Attorney-in-Fact for Nicholas J. D. 01/05/2018
Campbell

__Signature of Reporting Person

Date

Explanation of Responses:

* 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).

(1) Includes restricted shares, including with respect to performance-based restricted shares, the number of shares that would vest if the maximum performance level is achieved.

(2) The options become exercisable upon satisfaction of a service condition. The service condition will be met as to 20% of the options on each of the first five anniversaries of the grant date, subject to the officer's continued service through such date. As of the date of this filing, the service condition has been satisfied with respect to 80% of the options. The remaining options become exercisable on December 17, 2018.

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Remarks:

ExhibitÂ List:

ExhibitÂ 24Â -Â PowerÂ ofÂ Attorney

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.