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OMB APPROVAL

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FORM D

Notice of Exempt Offering of Securities

U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5)

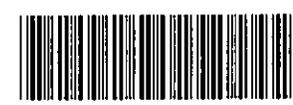
Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

Item 1. Issuer's Identity

Name of Issuer
Maiden Capital Financing Trust ("Maiden Trust")

Jurisdiction of Incorporation/Organization
Delaware

Year of Incorporation/Organization (Select one)
 Over Five Years Ago Within Last Five Years (specify year) 2009 Yet to Be Formed

Previous Name(s) None

09002831

Entity Type (Select one)
 Corporation
 Limited Partnership
 Limited Liability Company
 General Partnership
 Business Trust
 Other (Specify)
Statutory Trust

(If more than one issuer is filing this notice, check this box and identify additional issuer(s) by attaching Items 1 and 2 Continuation Page(s).)

Item 2. Principal Place of Business and Contact Information

Street Address 1
6000 Midlantic Drive, Suite 200 South
City: Mt. Laurel State/Province/Country: NJ

Street Address 2
Laurel Corporate Center, PO Box 5041
ZIP/Postal Code: 08054 Phone No.: 856-359-2400

PROCESSED

MAR 2 2009

THOMSON REUTERS

Item 3. Related Persons

Last Name: Raschbaum First Name: Arturo Middle Name: M.

Street Address 1: 6000 Midlantic Drive, Suite 200 South City: Mt. Laurel State/Province/Country: NJ
Street Address 2: Laurel Corporate Center, PO Box 5041 Section ZIP/Postal Code: 08054

SEC Mail Processing

FEB 04 2009

Washington, DC

Relationship(s): Executive Officer Director Promoter

Clarification of Response (if Necessary): CEO of Maiden Ltd, CEO & Director of Maiden North America, and Administrator of Maiden Trust

(Identify additional related persons by checking this box and attaching Item 3 Continuation Page(s).)

Item 4. Industry Group (Select one)

- Agriculture
- Banking and Financial Services
 - Commercial Banking
 - Insurance
 - Investing
 - Investment Banking
 - Pooled Investment Fund
- Business Services
- Energy
 - Electric Utilities
 - Energy Conservation
 - Coal Mining
 - Environmental Services
 - Oil & Gas
 - Other Energy
- Construction
- REITS & Finance
- Residential
- Other Real Estate
- Health Care
 - Biotechnology
 - Health Insurance
 - Hospitals & Physicians
 - Pharmaceuticals
 - Other Health Care
- Retailing
- Restaurants
- Technology
 - Computers
 - Telecommunications
 - Other Technology
- Manufacturing
- Real Estate
 - Commercial
- Travel
 - Airlines & Airports
 - Lodging & Conventions
 - Tourism & Travel Services
 - Other Travel
- Other

If selecting this industry group, also select one fund type below and answer the question below:

- Hedge Fund
 - Private Equity Fund
 - Venture Capital Fund
 - Other Investment Fund
- Is the issuer registered as an investment company under the Investment Company Act of 1940? Yes No
- Other Banking & Financial Services

Item 5. Issuer Size (Select one)

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)

- No Revenues
- \$1 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

OR

Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above)

- No Aggregate Net Asset Value
- \$1 - \$5,000,000
- \$5,000,001 - \$25,000,000
- \$25,000,001 - \$50,000,000
- \$50,000,001 - \$100,000,000
- Over \$100,000,000
- Decline to Disclose
- Not Applicable

Item 6. Federal Exemptions and Exclusions Claimed (Select all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Rule 504(b)(1) (not (i), (ii) or (iii)) | <input type="checkbox"/> Section 3(c)(1) | <input type="checkbox"/> Section 3(c)(9) |
| <input type="checkbox"/> Rule 504(b)(1)(i) | <input type="checkbox"/> Section 3(c)(2) | <input type="checkbox"/> Section 3(c)(10) |
| <input type="checkbox"/> Rule 504(b)(1)(ii) | <input type="checkbox"/> Section 3(c)(3) | <input type="checkbox"/> Section 3(c)(11) |
| <input type="checkbox"/> Rule 504(b)(1)(iii) | <input type="checkbox"/> Section 3(c)(4) | <input type="checkbox"/> Section 3(c)(12) |
| <input type="checkbox"/> Rule 505 | <input type="checkbox"/> Section 3(c)(5) | <input type="checkbox"/> Section 3(c)(13) |
| <input checked="" type="checkbox"/> Rule 506 | <input type="checkbox"/> Section 3(c)(6) | <input type="checkbox"/> Section 3(c)(14) |
| <input type="checkbox"/> Securities Act Section 4(6) | <input type="checkbox"/> Section 3(c)(7) | |

Item 7. Type of Filing

- New Notice OR Amendment

Date of First Sale in this Offering: OR First Sale Yet to Occur

Item 8. Duration of Offering

Does the issuer intend this offering to last more than one year? Yes No

Item 9. Type(s) of Securities Offered (Select all that apply)

- | | |
|--|---|
| <input checked="" type="checkbox"/> Equity | <input type="checkbox"/> Pooled Investment Fund Interests |
| <input type="checkbox"/> Debt | <input type="checkbox"/> Tenant-in-Common Securities |
| <input type="checkbox"/> Option, Warrant or Other Right to Acquire Another Security | <input type="checkbox"/> Mineral Property Securities |
| <input type="checkbox"/> Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security | <input checked="" type="checkbox"/> Other (Describe) |

Item 10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer? Yes No

Clarification of Response (if Necessary)

Item 11. Minimum Investment

Minimum investment accepted from any outside investor \$ N/A

Item 12. Sales Compensation

Recipient

Friedman, Billings & Ramsey

Recipient CRD Number

25027

No CRD Number

(Associated) Broker or Dealer None

(Associated) Broker or Dealer CRD Number

No CRD Number

Street Address 1

1001 Nineteenth Street North

Street Address 2

City

Arlington

State/Province/Country

VA

ZIP/Postal Code

22209

States of Solicitation All States

- Grid of state checkboxes: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY, PR

(Identify additional person(s) being paid compensation by checking this box and attaching Item 12 Continuation Page(s).)

Item 13. Offering and Sales Amounts

(a) Total Offering Amount \$ 260,000,000 OR Indefinite
(b) Total Amount Sold \$ 260,000,000
(c) Total Remaining to be Sold \$ 0 OR Indefinite

Clarification of Response (if Necessary)

[Empty box for clarification]

Item 14. Investors

Check this box if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering:

NONE

Enter the total number of investors who already have invested in the offering: 18

Item 15. Sales Commissions and Finders' Fees Expenses

Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$ 3,686,591 Estimate

Finders' Fees \$ Estimate

Clarification of Response (if Necessary)

Includes commission and expenses paid to placement agent.

Item 16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ 0

Estimate

Clarification of Response (if Necessary)

[Empty box for clarification of response]

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and submitting this notice.

Terms of Submission. In Submitting this notice, each identified issuer is:

Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in accordance with applicable law, the information furnished to offerees.*

Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes; or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.

Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each identified issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box and attach Signature Continuation Pages for signatures of issuers identified in Item 1 above but not represented by signer below.)

Issuer(s)

Maiden Capital Financing Trust

Name of Signer

Arturo M. Raschbaum

Signature

Arturo M Raschbaum

Title

Administrator

Number of continuation pages attached:

5

Date

1-29-09

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.

Signature Continuation Page

Signature and Submission

The undersigned is the duly authorized representative of the issuer(s), identified in the field beside the individual's name below.

Issuer

Maiden Holdings North America, Ltd.

Name of Signer

Arturo M. Raschbaum

Signature

Arturo M Raschbaum

Title

Chief Executive Officer

Date

1-29-09

Issuer

Maiden Holdings, Ltd. ("Maiden Ltd.")

Name of Signer

Michael J. Tait

Signature

Title

Chief Financial Officer

Date

Issuer

Name of Signer

Signature

Title

Date

Issuer

Name of Signer

Signature

Title

Date

Signature Continuation Page

Signature and Submission

The undersigned is the duly authorized representative of the issuer(s), identified in the field beside the individual's name below.

Issuer

Maiden Holdings North America, Ltd.

Name of Signer

Arturo M. Raschbaum

Signature

Title

Chief Executive Officer

Date

Issuer

Maiden Holdings, Ltd. ("Maiden Ltd.")

Name of Signer

Michael J. Tait

Signature

Michael J. Tait

Title

Chief Financial Officer

Date

30 Jan 2009

Issuer

Name of Signer

Signature

Title

Date

Issuer

Name of Signer

Signature

Title

Date

Items 1 and 2 Continuation Page

Item 1 and 2. Issuer's Identity and Contact Information (Continued)

Name of Issuer
Maiden Holdings North America, Ltd. ("Maiden North America")

Jurisdiction of Incorporation/Organization
Delaware

Year of Incorporation/Organization (Select one)
 Over Five Years Ago Within Last Five Years (specify year) Yet to Be Formed
 2008

Previous Name(s) None

Entity Type (Select one)
 Corporation
 Limited Partnership
 Limited Liability Company
 General Partnership
 Business Trust
 Other (Specify)

At your option, supply separate contact information for this issuer:

Street Address 1: 6000 Midlantic Drive, Suite 200 South

Street Address 2: Laurel Corporate Center, PO Box 5041

City: Mt. Laurel

State/Province/Country: NJ

ZIP/Postal Code: 08054

Phone No.: 856-359-2400

Name of Issuer
Maiden Holdings, Ltd. ("Maiden Ltd.")

Jurisdiction of Incorporation/Organization
Bermuda

Year of Incorporation/Organization (Select one)
 Over Five Years Ago Within Last Five Years (specify year) Yet to Be Formed
 2007

Previous Name(s) None

Entity Type (Select one)
 Corporation
 Limited Partnership
 Limited Liability Company
 General Partnership
 Business Trust
 Other (Specify)
 Bermuda Holding Company

At your option, supply separate contact information for this issuer:

Street Address 1: 48 Par-la-Ville Road

Street Address 2: Suite 1141

City: Hamilton

State/Province/Country: Bermuda

ZIP/Postal Code: HM 11

Phone No.: 441.292.7090

Name of Issuer

Jurisdiction of Incorporation/Organization

Year of Incorporation/Organization (Select one)
 Over Five Years Ago Within Last Five Years (specify year) Yet to Be Formed

Previous Name(s) None

Entity Type (Select one)
 Corporation
 Limited Partnership
 Limited Liability Company
 General Partnership
 Business Trust
 Other (Specify)

At your option, supply separate contact information for this issuer:

Street Address 1

Street Address 2

City

State/Province/Country

ZIP/Postal Code

Phone No.

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name	Middle Name
Caviet	Max	G.
Street Address 1	Street Address 2	
48 Par-la-Ville Road	Suite 1141	
City	State/Province/Country	ZIP/Postal Code
Hamilton	Bermuda	HM 11
Relationship(s): <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		
Clarification of Response (if Necessary) Director of Maiden Ltd.		

Last Name	First Name	Middle Name
Tait	Michael	J.
Street Address 1	Street Address 2	
48 Par-la-Ville Road	Suite 1141	
City	State/Province/Country	ZIP/Postal Code
Hamilton	Bermuda	HM 11
Relationship(s): <input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter		
Clarification of Response (if Necessary) Vice President of Maiden North America, CFO of Maiden Ltd.		

Last Name	First Name	Middle Name
Marshalek	John	M.
Street Address 1	Street Address 2	
6000 Midlantic Drive, Suite 200 South	Laurel Corporate Center, PO Box 5041	
City	State/Province/Country	ZIP/Postal Code
Mt. Laurel	NJ	08054
Relationship(s): <input checked="" type="checkbox"/> Executive Officer <input type="checkbox"/> Director <input type="checkbox"/> Promoter		
Clarification of Response (if Necessary) COO of Maiden Ltd., President of Maiden North America, Administrator of Maiden Trust		

Last Name	First Name	Middle Name
Zyskind	Barry	D.
Street Address 1	Street Address 2	
6000 Midlantic Drive, Suite 200 South	Laurel Corporate Center, PO Box 5041	
City	State/Province/Country	ZIP/Postal Code
Mt. Laurel	NJ	08054
Relationship(s): <input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter		
Clarification of Response (if Necessary) Director of Maiden North America and Maiden Ltd.		

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name	First Name	Middle Name
Neff	Raymond	M.
Street Address 1	Street Address 2	
6000 Midlantic Drive, Suite 200 South	Laurel Corporate Center, PO Box 5041	
City	State/Province/Country	ZIP/Postal Code
Mt. Laurel	NJ	08054
Relationship(s):	<input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)	Director of Maiden North America and Maiden Ltd.	

Last Name	First Name	Middle Name
Lyons	Simcha	
Street Address 1	Street Address 2	
6000 Midlantic Drive, Suite 200 South	Laurel Corporate Center, PO Box 5041	
City	State/Province/Country	ZIP/Postal Code
Mt. Laurel	NJ	08054
Relationship(s):	<input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)	Director of Maiden North America and Maiden Ltd.	

Last Name	First Name	Middle Name
Neuberger	Yehuda	L.
Street Address 1	Street Address 2	
6000 Midlantic Drive, Suite 200 South	Laurel Corporate Center, PO Box 5041	
City	State/Province/Country	ZIP/Postal Code
Mt. Laurel	NJ	08054
Relationship(s):	<input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)	Director of Maiden North America and Maiden Ltd.	

Last Name	First Name	Middle Name
Nigro	Steven	H.
Street Address 1	Street Address 2	
6000 Midlantic Drive, Suite 200 South	Laurel Corporate Center, PO Box 5041	
City	State/Province/Country	ZIP/Postal Code
Mt. Laurel	NJ	08054
Relationship(s):	<input type="checkbox"/> Executive Officer <input checked="" type="checkbox"/> Director <input type="checkbox"/> Promoter	
Clarification of Response (if Necessary)	Director of Maiden North America and Maiden Ltd.	

(Copy and use additional copies of this page as necessary.)

Item 3 Continuation Page

Item 3. Related Persons (Continued)

Last Name: Schmitt First Name: Karen Middle Name: L.

Street Address 1: 6000 Midlantic Drive, Suite 200 South Street Address 2: Laurel Corporate Center, PO Box 5041

City: Mt. Laurel State/Province/Country: Bermuda ZIP/Postal Code: HM 11

Relationship(s): Executive Officer Director Promoter

Clarification of Response (if Necessary): COO of Maiden North America, Administrator of Maiden Trust

Last Name: Hawk First Name: Paul Middle Name:

Street Address 1: 6000 Midlantic Drive, Suite 200 South Street Address 2: Laurel Corporate Center, PO Box 5041

City: Mt. Laurel State/Province/Country: NJ ZIP/Postal Code: 08054

Relationship(s): Executive Officer Director Promoter

Clarification of Response (if Necessary): CFO and Secretary of Maiden North America

Last Name: First Name: Middle Name:

Street Address 1: Street Address 2:

City: State/Province/Country: ZIP/Postal Code:

Relationship(s): Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name: First Name: Middle Name:

Street Address 1: Street Address 2:

City: State/Province/Country: ZIP/Postal Code:

Relationship(s): Executive Officer Director Promoter

Clarification of Response (if Necessary):

(Copy and use additional copies of this page as necessary.)

END Form D 9