Edgar Filing: WHITE MOUNTAINS INSURANCE GROUP LTD - Form 4

WHITE MOUNTAINS INSURANCE GROUP LTD

Form 4

Common

Shares

November 29, 2016

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FORM	ORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB AF	PROVAL	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may continue See Instruction.	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 20(b) of the Investment Company Act of 1935 or Section 3235-028 Number: Expires: Section 3235-028 Expires: Section 17(a) of the Public Utility Holding Company Act of 1934, Section 17(a) of the Investment Company Act of 1935 or Section									
(Print or Type R	esponses)									
BARRETTE RAYMOND JOSEPH Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
		INSU	RANCE GRO	OUP LT	D [W	/TM]	(Check all applicable)			
(Last) C/O WHITE INSURANC MAIN STRE	of Earliest Trans /Day/Year) /2016	•				X Director 10% Owner X Officer (give titleX Other (specify below)				
	nendment, Date (Ionth/Day/Year)	th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
HANOVER, NH 03755 — Form fried by Wore than One Reporting Person						porting				
(City)	(State) (Zip) Ta	ble I - Non-Der	ivative So	ecurit	ies Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Date, any (Month/Day/Yea	if Transaction Code ((Instr. 3, 4	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares	11/29/2016					\$ 742	40,062 (1)	D		
Common Shares	11/29/2016		F 2	2,604	D	\$ 854.81	37,458 <u>(1)</u>	D		
Common Shares (restricted)							5,000	D		

By IRA

6,106

I

Common	716	т	D 401/1-)
Shares	/10	1	By 401(k)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(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. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Share Options (right to buy)	\$ 742	11/29/2016		M	3,000	(2)	01/20/2017	Common Shares	3,000

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BARRETTE RAYMOND JOSEPH RENE C/O WHITE MOUNTAINS INSURANCE GROUP 80 SOUTH MAIN STREET HANOVER, NH 03755	X		Chief Executive Officer	Chairman of the Board		

Signatures

Wesley C. Bell, by Power of 11/29/2016 Attorney

**Signature of Reporting Person Date

Reporting Owners 2

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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) Includes shares held in accounts jointly owned by the Reporting Person and his spouse.
- (2) All of the options are fully vested and exercisable.

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.