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WHITE MOUNTAINS INSURANCE GROUP LTD

Form 4 June 24, 2008

FORM	ORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSI								OMB APPROVAL				
Washington, D.C. 20549									OMB Number:	3235-0287			
Check this if no longe	<i>G</i> ,						Expires:	January 31, 2005					
subject to Section 16 Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERS SECURITIES								ERSHIP OF	Estimated average burden hours per response 0.			
Form 5 obligation may conti See Instru-1(b).	s Section 17(a	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											
(Print or Type R	esponses)												
SEELIG ROBERT LAWRENCE Symbol									5. Relationship of Reporting Person(s) to Issuer				
INSURA							7D [V	WTM]	(Check all applicable)				
(Last)	(First) (Middle) 3. Date of E					nsaction		-	Director		Owner (specify		
C/O WHITE MOUNTAINS 06/20/20 INSURANCE GROUP, LTD, 80 SOUTH MAIN STREET (Month/D				Jay/ I cai)					_X_ Officer (give title Other (specify below)				
	(Street) 4. If Amen				dment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mont HANOVER, NH 03755								-	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	Zip)	Table	I - Nor	ı-De	erivative S	Securi		red, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or					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	06/20/2008			Code P	V	Amount 199	(D)	Price \$ 443.2		D			
Shares	00/20/2000			1		1))	11	ψ 113.2	077	Ъ			
Common Shares	06/20/2008			P		1	A	\$ 444.19	700	D			
Common Shares (restricted)									2,000	D			
Common Shares									146 <u>(1)</u>	I	By 401(k)		

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

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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene

Follo Repo Trans (Insti

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A	
									Amount	
						Date Exercisable	Expiration Date		or	
								0	Number	
				C 1 1	(A) (D)					
				Code V	(A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SEELIG ROBERT LAWRENCE C/O WHITE MOUNTAINS INSURANCE GROUP, LTD 80 SOUTH MAIN STREET HANOVER, NH 03755

Vice Pres. & General Counsel

Signatures

Jason R. Lichtenstein, by Power of Attorney 06/24/2008

**Signature of Reporting Person Date

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).

Since March 13, 2008, the date of Reporting Person's last filing, Reporting Person acquired 7 shares of WTM Common Shares in his (1) 401(k) Plan account. WTM Common Shares are purchased at fair market value on the date of purchase. The information in this report is based on a plan statement dated as of May 31, 2008.

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.

Reporting Owners 2