## Edgar Filing: CAMPBELL REID TARLTON - Form 4

CAMPBELL I Form 4 January 02, 20	REID TARLTON )13	ſ											
									OMB AF	PROVAL			
-	UNITED SI	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											
Check this if no longe subject to Section 16 Form 4 or	r STATEME									January 31, 2005 verage s per 0.5			
Form 5 obligations may contin <i>See</i> Instruc 1(b).	ue. 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 30(h) of the Investment Company Act of 1940											
(Print or Type Re	esponses)												
1. Name and Address of Reporting Person <u>*</u> CAMPBELL REID TARLTON								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<b>.</b>	(First) (Mid					บเพ	/ 1 1/1		100	0			
(Last) C/O WHITE INSURANCE SOUTH MAI	idle) 80	$(v_1 v_1 v_1 v_1 v_1 v_2 v_1 v_3 v_1 v_1 v_1 v_1 v_1 v_1 v_1 v_2 v_1 v_3 v_3 v_3 v_3 v_3 v_3 v_3 v_3 v_3 v_3$					Director 10% Owner _X Officer (give title Other (specify below) Managing Director						
	(Street)						A	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						Ī	Form filed by Mo Person	ore than One Rej	porting			
(City)	(State) (Z	ip)	Table	I - Non-De	rivative S	ecurit	ies Acqui	ired, Disposed of,	or Beneficiall	y Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	emed on Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securit or(A) or Di (Instr. 3, -	sposed	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common	12/21/2012				Amount	(D)	Price \$	(Instr. 3 and 4)	D				
Shares	12/31/2012			F	900 <u>(1)</u>	D	512.26	8,700	D				
Common Shares (Restricted)								5,300	D				
Common Shares								61	Ι	by 401(k)			

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

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<b>Reporting Owner Name / Address</b>		Relationships						
	Direc	tor	10% Owner	Officer	Other			
CAMPBELL REID TARLTON C/O WHITE MOUNTAINS INSURANCE GROU 80 SOUTH MAIN STREET HANOVER, NH 03755	JP, LTD			Managing Director				
Signatures								
Jason R. Lichtenstein, by Power of Attorney	01/02/2013							
**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).

Reflects payment of tax liability incident to the vesting of restricted shares by delivery of securities. (1)

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.