CAMPBELL REID TARLTON

Form 4 May 17, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB

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obligations

Check this box

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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type R	Responses)											
	Name and Address of Reporting Person * CAMPBELL REID TARLTON		2. Issuer Name and Ticker or Trading Symbol WHITE MOUNTAINS INSURANCE GROUP LTD [WTM]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
INSURANC	(First) (I E MOUNTAINS EE GROUP, LTE AIN STREET	Middle) 0 , 80	3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013					Director 10% Owner X Officer (give title Other (specify below) Managing Director				
HANOVER,	(Street)			ndment, Dat th/Day/Year)	_		Ap _X	Individual or Joint, plicable Line) _ Form filed by One _ Form filed by More son	Reporting Pers	on		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ities Acquire	ed, Disposed of, or	Beneficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction Dai (Month/Day/Year)) Executi	emed ion Date, if n/Day/Year)	Code (Instr. 8)	4. Securi our Dispo (Instr. 3,	sed of 4 and (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 Shares	05/15/2013			S	1,087	D	\$ 605.62	7,613	D			
Common Shares	05/15/2013			S	1,200	D	\$ 605.6201	6,413	D			
Common Shares	05/15/2013			S	3	D	\$ 607.59	6,410	D			
Common Shares	05/15/2013			S	100	D	\$ 608	6,310	D			
	05/15/2013			S	10	D	\$ 608.22	6,300	D			

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Common Shares								
Common Shares	05/15/2013	S	700	D	\$ 608.52	5,600	D	
Common Shares	05/15/2013	S	100	D	\$ 608.61	5,500	D	
Common Shares (Restricted)						7,550	D	
Common Shares						67 <u>(1)</u>	I	by 401(k)

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

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(9-02)

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. orNumber	6. Date Exerc Expiration D			le and ant of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	rities	(Instr. 5)	Bene
	Derivative		•		Securities	S		(Instr	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

CAMPBELL REID TARLTON C/O WHITE MOUNTAINS INSURANCE GROUP, LTD 80 SOUTH MAIN STREET HANOVER, NH 03755

Managing Director

2 Reporting Owners

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Signatures

Jason R. Lichtenstein, by Power of Attorney 05/17/2013

**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 accumulation of 6 WTM Common Shares in Reporting Person's Company 401(k) account since his last filed report. WTM

 (1) 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 3, 2013.

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.

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