### Edgar Filing: WHITE MOUNTAINS INSURANCE GROUP LTD - Form 4

### WHITE MOUNTAINS INSURANCE GROUP LTD

Form 4 May 06, 2016

Shares (restricted)

FORM	4					PPROVAL		
1 OI IIVI	<b>UNITED STAT</b>		S AND EXCHANO on, D.C. 20549	GE COMMISSION	OMB Number:	3235-0287		
Check this if no longe	r		·		Expires:	January 31,		
subject to Section 16. Form 4 or Form 5 obligations	Filed pursuant	STATEMENT OF CHANGES IN BENEFICIAL OWNI SECURITIES  Filed pursuant to Section 16(a) of the Securities Exchange A Section 17(a) of the Public Utility Holding Company Act of 1				Estimated average burden hours per response 0.5		
may contin See Instruction 1(b).	iue.	(h) of the Investme						
(Print or Type Re	esponses)							
	dress of Reporting Person RAYMOND JOSEPH	H Symbol	and Ticker or Trading	5. Relationship of Issuer	5. Relationship of Reporting Person(s) to Issuer			
KLIVL		WHITE MOU INSURANCE	OROUP LTD [W	ΓM] (Chec	(Check all applicable)			
(Last)	(First) (Middle)	(Month/Day/Year)			_X_ Director 10% OwnerX_ Officer (give title _X_ Other (specify			
C/O WHITE MOUNTAINS 05/05/2016 below)  INSURANCE GROUP, 80 SOUTH  MAIN STREET  below) below) Chief Executive Officer / Chairman of t					rman of the			
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by 0	_X_ Form filed by One Reporting Person			
HANOVER, NH 03755  — Form filed by More than One Reporting Person								
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	any	ecution Date, if Tran Code onth/Day/Year) (Inst	1 '	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Shares	05/05/2016	M	5,000 A	\$ 31,452 <u>(1)</u>	D			
Common Shares				14,778	I	By Grantor Retained Annuity Trust		
Common								

5,000

D

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.						
Common Shares	707 <u>(2)</u> I		By 401(k)			
Common Shares	6,106 I		By IRA			

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

number.

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. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day)	Pate	7. Title and Underlying (Instr. 3 and	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Share Options	\$ 742	05/05/2016		M	5,000	(3)	01/20/2017	Common Shares	5,000

## **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						
Jason R. Lichtenstein, by Power of Attorney	05/06/20	)16				
**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.
  - Since the date of Reporting Person's last filing, he acquired 1 share of WTM Common Shares under the company 401(k) plan. WTM
- (2) 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 April 29, 2016.
- (3) 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.