The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

| | OMB APPROVAL | |
|--|--------------------------|-----------------|
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION | OMB Number: | 3235- 0006 |
| Washington, D.C. 20549 FORM 13F | Expires: | Oct 31, 2018 |
| FORM 13F COVER PAGE | Estimated average burden | |
| | hours per response: | 23.8 |

| Report for the Calendar Year or Quarter Ended: 09-30-2015 | | | | | |
|---|-------------------|----------------------------|--|--|--|
| Check here if Amen | dment | Amendment Number: | | | |
| This Amendment (C | Check only one.): | is a restatement. | | | |
| | | adds new holdings entries. | | | |
| Institutional Investment Manager Filing this Report: | | | | | |
| Name: | White Mountains | s Insurance Group Ltd | | | |
| Address: | 80 South Main St | reet | | | |
| | Hanover, NH 03 | 755 | | | |
| Form 13F File Number: | 028-01681 | | | | |

The institutional investment manager filing this report and the person by whom it is signed hereby represent that the person signing the report is authorized to submit it, that all information contained herein is true, correct and complete, and that it is understood that all required items, statements, schedules, lists, and tables, are considered integral parts of this form.

Person Signing this Report on Behalf of Reporting Manager:

| Name: | J. Brian Palmer | | | | | |
|--|--|---------------|------------|--|--|--|
| Title: | Managing Director & Chief Accounting Officer | | | | | |
| Phone: | 603-640-2200 | | | | | |
| Signature, Place, and Date of Signing: | | | | | | |
| /s/ J. Brian Palmer | | Boston, MA | 11-12-2015 | | | |
| [Signatu | re] | [City, State] | [Date] | | | |

Report Type (Check only one.):

13F HOLDINGS REPORT. (Check here if all holdings of this reporting manager are reported in this report.)

13F NOTICE. (Check here if no holdings reported are in this report, and all holdings are reported by other reporting manager(s).)

X 13F COMBINATION REPORT. (Check here if a portion of the holdings for this reporting manager are reported in this report and a portion are reported by other reporting manager(s).)

List of Other Managers Reporting for this Manager: [If there are no entries in this list, omit this section.]

| Form 13F File Number | Name |
|-------------------------|---------------------------------|
| 028-12951 | OneBeacon Insurance Group, Ltd. |
| 028-10494 | White Mountains Advisors LLC |

Form 13F Summary Page

| Report Summary: | |
|---|-------------|
| Number of Other Included Managers: | 0 |
| Form 13F Information Table Entry Total: | 1 |
| Form 13F Information Table Value Total: | 650,594 |
| | (thousands) |

List of Other Included Managers:

Provide a numbered list of the name(s) and Form 13F file number(s) of all institutional investment managers with respect to which this report is filed, other than the manager filing this report.

[If there are no entries in this list, state "NONE" and omit the column headings and list entries.]

NONE

| The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is | | | | | | |
|--|--|--|--|--|--|--|
| accurate and complete. | | | | | | |
| The reader should not assume that the information is accurate and complete. | | | | | | |

| | OMB APPROVAL | | |
|--|--------------------------|-----------------|--|
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION | OMB Number: | 3235- 0006 | |
| Washington, D.C. 20549 FORM 13F | Expires: | Oct 31, 2018 | |
| FORM 13F INFORMATION TABLE | Estimated average burden | | |
| | hours per response: | 23.8 | |

| COLUMN 1 | COLUMN 2 | COLUMN 3 | COLUMN 4 | COLUMN | 5 | | COLUMN 6 | COLUMN 7 | COLUMN | 3 | |
|-------------------------|-------------------|-------------|-------------|------------|-----|------|------------|-------------|------------|---------|------|
| | | | VALUE | SHRS OR | SH/ | PUT/ | INVESTMENT | OTHER | VOTING A | UTHORIT | Y |
| NAME OF ISSUER | TITLE OF CLASS | CUSIP | (x\$1000) | PRN AMT | PRN | CALL | DISCRETION | MANAGER | SOLE | SHARED | NONE |
| SYMETRA FINL CORP | СОМ | 87151Q106 | 650,594 | 20,562,379 | SH | | SOLE | N/A | 20,562,379 | 0 | 0 |