FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	ANNUAL STATE
Instruction 1(b).	ANNUAL STATE

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

ı	OMB APPROVAL									
	OMB Number:	3235-0362								
	Estimated average bur	rden								
1	hours por rosponso:	1 0								

Form 3 Holdings Reported. Form 4 Transactions Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	Transactions 1	<u>'</u>		or Section	1 30(11)) or trie	mvesu	ment C	ompany Ac	t 01 194	0							
1. Name and Address of Reporting Person* <u>BYRNE JOHN JOSEPH</u>				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) Director 10% Owner						
				. GRUU	P LI	וחו	WTM	J						er (give title	е	X Oth	er (specify	
(Last)	(Fir	st) (Middle)										belov Poti	•	rman	of the B	•	
C/O WHITE MOUNTAINS INSURANCE GROUP, LTD 80 SOUTH MAIN STREET				Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006 4. If Amendment, Date of Original Filed (Month/Day/Year)							Retired Chairman of the Board							
											6. Individual or Joint/Group Filing (Check Applicable							
(Street)				-						•	,	Line		- 6111 0	· · D-			
HANOVI	ER NI	Ι (3755)		n filed by C n filed by M				
-													Pers	on				
(City)	(Sta	ate) (Zip)															
		Tabl	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	d, Di	sposed	of, or	Benefi	ciall	y Owne	ed				
Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			sed	5. Amount of Securities Beneficially Owned at end of		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership			
				(montain bay)	icui,	8)		Amount		(A) or (D) Price		Issuer's Fiscal Year (Instr. 3 and 4)		Fiscal	Indirect (I) (Instr. 4)		(Instr. 4)	
Common	Shares												558,	793(1)		D		
Common	shares												148,	.091(1)		I	By Family Trusts (GRAT)	
Common	Shares		08/15/2006			C	j	1,	,220	D	\$0)	1,	221		I	By wife	
Common	Shares													2		I	By 401(k)	
Common	Shares												4,	325			By Merastar Insurance	
													Company					
		Ta	ıble II - Derivat	ive Secur	ities	Acqu	ired,	Disp	osed of	or Bo	eneficia	ally (Owned			,		
			(e.g., p	uts, calls,	warı	rants,	opti	ons, (converti	ble se	curitie	s)						
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. Transaction Code (Instr. 8)	ansaction of		vative urities uired or osed or 7, 4		te Exercisable and ration Date th/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Owner Form: Direct or Ind (I) (Ins	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficia Ownersh tt (Instr. 4)	
											Amou	nt						
							Date		Expiration		Numb	er						
	I				(A)	(D)		isable	Date	Title	Shares	s					1	

Explanation of Responses:

1. Since May 19, 2006, the Reporting Person's last report, 130,488 WTM Common Shares previously held in a grantor retained annuity trust have been distributed and are now owned directly.

Remarks:

John J. Byrne ** Signature of Reporting Person 02/14/2007

Date

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

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).