FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinatan | D C | 20540 |
|-------------|------|-------|
| Washington, | D.C. | 20549 |

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|---------------|------------------|

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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

| 1. Name and Address of Reporting Person* WHITE MOUNTAINS INSURANCE GROUP LTD | | | | <u>On</u> | 2. Issuer Name and Ticker or Trading Symbol OneBeacon Insurance Group, Ltd. [OB] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | heck all a Dir Off | hip of Reportir oplicable) ector icer (give title ow) | ng Per | ₹ 10% O | wner (specify | | |
|--|--|--|---|----------------------------------|--|-----|---------|-------|--|-----|-----------|---|--|--------------------------|---|---|--|---|--|--|
| (Last) (First) (Middle) 80 SOUTH MAIN STREET | | | | 03/ | 03/15/2007 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | or Joint/Group | o Filin | | | | |
| (Street) | | |)3755 | | | | | | | | | | | Lir | X Fo | • | n filed by One Reporting Person n filed by More than One Reporting son | | | |
| (City) | (St | | Zip) | n-Deriv | ative | Sad | curitio | s Acc | uired | Die | nosed o | f or | Rono | ficia | Ilv Own | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | ction | ction 2A. Deemed Execution Date, | | | | | ies Acquired (A) or Of (D) (Instr. 3, 4 ar | | | 5. Ai Secu Bend Own | mount of irities eficially ed Following | Forn (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Pr | | Price | Tran | orted saction(s) r. 3 and 4) | | | (Instr. 4) | |
| Common Shares 03/1 | | | 03/15 | /2007 | 2007 | | S | | 645,262 | | D | \$25. | 85 7: | 71,754,738 | | I | By Lone Tree Holdings Ltd. ⁽¹⁾ | | | |
| | 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. Deem Execution if any (Month/D | n Date, | 4. Transactio Code (Inst | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | e ear) | Amount of Securities Underlying Derivative Security (Instr. and 4) | | unt | 8. Price of Derivative Security (Instr. 5) | | F C C | LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Lone Tree Holdings Ltd. is an indirect wholly-owned subsidiary of White Mountains Insurance Group, Ltd.

Remarks:

<u>Dennis Beaulieu, Corporate</u> <u>Secretary</u>

03/15/2007

** Signature of Reporting Person

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

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.