1.

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

washington, D.C. 20549		

OIVIB APPROVAL										
OMB Number:	3235-0287									
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* <u>Hildreth Michaela</u>				2. Issuer Name and Ticker or Trading Symbol WHITE MOUNTAINS INSURANCE GROUP LTD [WTM]									Owner	
(Last) (First) (Middle) C/O WHITE MOUNTAINS INSURANCE GROUP, LTD 23 SOUTH MAIN STREET, SUITE 3B (Street) HANOVER NH 03755 (City) (State) (Zip)					e of Earliest Transa /2024	ction (M	onth/[Day/Year)		Officer (give title Other (specibelow) MD & Chief Accounting Officer				
					mendment, Date of	Original	Filed	(Month/Day/	Year)	6. Indiv Line)	vidual or Joint/Grou Form filed by On Form filed by Mo Person	e Reporting Per	son	
Date		2. Transac	tion	2A. Deemed Execution Date, if any	3. Transa Code (ction	4. Securities Disposed O	Acquire	d (A) or	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial		
					(Month/Day/Year)	8) Code	v	Amount	(A) or (D)	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	Ownership (Instr. 4)	
Common Shares 11/29/		11/29/2	2024		G		75	D	\$0	1,798	D			
Common Share	es (Restricted)										1,950	D		
Common Share	es										18(1)	I	by 401(k)	
									·					

(c.g., pats, cans, warra							runs, 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. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Reflects accumulation of 3 Common Shares in the Reporting Person's Company retirement account since her last report. The information in this report is based on a plan report dated as of December 2,

Wesley C Bell, by Power of <u>Attorney</u>

12/02/2024

** 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.