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.

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549 FORM 13F

OMB APPROVAL								
OMB Number:	3235-0006							
Estimated average burden								
hours per response:	23.8							

## **FORM 13F COVER PAGE**

Report for the Calenda	Year or Quarter Ended: 09-30-2023
Check here if Amendm	ent Amendment Number:
This Amendment (Che	ck only one.): is a restatement.
	adds new holdings entries.
Institutional Investme	nt Manager Filing this Report:
Name:	WHITE MOUNTAINS INSURANCE GROUP LTD
Address:	23 South Main Street
	Suite 3B
	Hanover, NH 03755
Form 13F File Number	028-01681
CRD Number (if application)	able):
SEC File Number (if applicable):	
is authorized to subm statements, schedules	tment manager filing this report and the person by whom it is signed hereby represent that the person signing the report it it, that all information contained herein is true, correct and complete, and that it is understood that all required items, s, lists, and tables, are considered integral parts of this form.  port on Behalf of Reporting Manager:
0 0	Michaela J. Hildreth
Title:	Managing Director and Chief Accounting Officer
Phone:	503-640-2200
Signature, Place, and	Date of Signing:
/s/ Michaela J. Hildreth [Signature	Boston, MA 11-09-2023  [City, State] [Date]
Report Type (Check o	nly one.):
=	PORT. (Check here if all holdings of this reporting manager are reported in this report.) ck here if no holdings reported are in this report, and all holdings are reported by other reporting manager(s).)
13F COMBINATION	REPORT. (Check here if a portion of the holdings for this reporting manager are reported in this report and a portion are porting manager(s).)
	Form 13F Summary Page
Report Summary:	

Number of Other Included Managers: 0 Form 13F Information Table Entry Total: 2 Form 13F Information Table Value Total: 440,944,652 (round to

nearest dollar)

# **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

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 **FORM 13F** 

OMB APPROVAL

OMB Number: 3235-0006
Estimated average burden
hours per response: 23.8

## **FORM 13F INFORMATION TABLE**

COLUMN 1	COLUMN 2	CC	COLUMN 3		COLUMN 5		5	COLUMN 6	COLUMN 7	C	COLUMN 8	
				VALUE	SHRS OR	SH/	PUT/	INVESTMENT	OTHER	VOTING	G AUTHOR	RITY
NAME OF ISSUER	TITLE OF CLASS	CUSIP	FIGI	(to the nearest dollar)	PRN AMT	PRN	CALL	DISCRETION	MANAGER	SOLE	SHARED	NONE
MEDIAALPHA INC	CL A	58450V104	BBG00XRTJ7K6	188,797,284	22,856,814	SH		SOLE		22,856,814	0	0
SPDR S&P 500 ETF TR	TR UNIT	78462F103	BBG000BDTBL9	252,147,368	589,846	SH		SOLE		589,846	0	0