FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response. . .0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 Filed By Romeo and Dye's Section 16 Filer

1. Name and Address of Reporting Person*	2. Date of Event	4. Issuer	Name and Ticl	ker or Trading Symbol						
	Requiring Statement	White M	lountains Insu	rance Group, Ltd. (WTM)						
Foy David Thomas	Month/Day/Year									
	April 1, 2003									
(Last) (First) (Middle)	3. I.R.S.	5. Relatio	onship of Repor	rting Person(s)	6. If Amendment,					
	Identification	to Issuer (Check all applicable)			Date of Original					
C/o White Mountains Insurance Group,	Number of Reporting	Directo	or	10% Owner	(Month/Day/Year)					
Ltd	Person, if an entity	X Officer	г	_ Other						
80 South Main Street	(voluntary)	(give title	e below)	(specify below)						
(Street)	7				7. Individual or Joint/Group Filing					
i i		Executiv	e Vice Preside	nt and Chief Financial	(Check Applicable Line)					
Hanover, NH 03755		Officer			X Form filed by One Reporting Person					
					Form filed by More than One Reporting					
					Person					
(City) (State) (Zip)		Table I — Non-Derivative Securities Beneficially Owned								
Title of Security 2	. Amount of	3.	Ownership Fo	rm:	4. Nature of Indirect					
(Instr. 4)	ecurities	Direct (D)			Beneficial Ownership					
E	Beneficially	or	Indirect (I)		(Instr. 5)					
	Owned	(In	nstr. 5)							
(Instr. 4)									
None		0								
		64 4 33	1 11 1							

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

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 control number

FORM 3 (continued) Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

-	. Title of Derivative Security	Date Exe	rcisable	Title and Amo	ount of Securities	4. Conversion or	Ownership Form	6. Nature of Indirect Beneficial Ownership	ı
- 1	Instr. 4)	and Expiration Date		Underlying Derivative Security		Exercise Price of	of Derivative	(Instr. 5)	1
- 1		(Month/Day/ Year)		(Instr. 4)		Derivative Security	Security:		ı
- 1		Date	Expiration	Title	Amount or	1	Direct (D)		ı
- 1		Exercisable	Date		Number of		or Indirect (I)		ı
					Shares		(Instr. 5)		
	None								ı
-									ı

Explanation of Responses:

By: /s/ Dennis P. Beaulieu, Attorney-in-Fact

April 1, 2003

**Signature of Reporting Person

**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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Brian Palmer, Chief Accounting Officer and Dennis P. Beaulieu, Secretary, (1)

execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of White Mountains Insurance Group, Ltd. (the "C

do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4, or 5,

take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, y with Section 16 of the Securities Exchange Act of 1934.

The undersigned hereby grants this Power of Attorney with the understanding that information provided to each such attorney-in-fact is strictly confidential and will

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the under IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 26th day of February 2003.

/s/ David T. Foy

David T. Foy

^{*} If the form is filed by more than one reporting person, see Instruction $5(\dot{b})(v)$.