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OneBeacon Insurance Group, Ltd. Form 3 November 06, 2006 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number 0 3235-0104

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> WHITE MOUNTAINS INSURANCE GROUP LTD	2. Date of Event Requiring Statement (Month/Day/Year) 11/06/2006	3. Issuer Name and Ticker or Trading Symbol OneBeacon Insurance Group, Ltd. [OB]				
(Last) (First) (Middle)		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
80 SOUTH MAIN STREET		(Charles	111:1-1-)			
(Street)		(Check all applicable)			6. Individual or Joint/Group	
HANOVER, NH 03755		Director _X 10% Owner F Officer Other (give title below) (specify below) Point		Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)	Table I - N	Non-Derivati	ve Securiti	es Be	neficially Owned	
1.Title of Security (Instr. 4)	2. Amount of Beneficially (Instr. 4)	Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1	
Common Shares	100,000,00	00	Ι	-	Vhite Mountains Holdings nuda Ltd. (1)	
information conta required to respo	ach class of securities benefici pond to the collection of ained in this form are not ond unless the form displa MB control number.	SE	C 1473 (7-02)		

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
WHITE MOUNTAINS INSURANCE GROUP LT 80 SOUTH MAIN STREET HANOVER, NH 03755	D	Â	ÂX	Â	Â		
Signatures							
Dennis Beaulieu, Corporate 11/06/200 Secretary)6						

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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).

(1) White Mountains Holdings Bermuda Ltd. is a direct wholly-owned subsidiary of White Mountains Insurance Group, Ltd.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.