OneBeacon Insurance Group, Ltd.

Form 3

November 07, 2006

# FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement OneBeacon Insurance Group, Ltd. [NYSE:OB]  **CARNASE ANDREW** (Month/Day/Year) 11/08/2006 **COLEMAN** (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O ONEBEACON (Check all applicable) INSURANCE GROUP. LTD., ONE BEACON Director 10% Owner **STREET** X\_ Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group Sr. VP. OneBeacon Ins. Co. Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person BOSTON. MAÂ 02108 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities 3. Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Â Class A Common Shares 0 D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not

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

required to respond unless the form displays a

currently valid OMB control number.

1. Title of Derivative Security 2. Date Exercisable and Ginstr. 4) 2. Date Exercisable and Expiration Date 3. Title and Amount of Securities Underlying Conversion Ownership Beneficial

#### Edgar Filing: OneBeacon Insurance Group, Ltd. - Form 3

	(Month/Day/Year)	Derivative Security (Instr. 4)		curity	or Exercise Price of	Form of Derivative	Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Option to buy	10/18/2007	04/18/2013	Class A Common Shares	24,696	\$ 30	D	Â
Option to buy	10/18/2008	04/18/2014	Class A Common Shares	24,696	\$ 30	D	Â
Option to buy	10/18/2009	04/18/2015	Class A Common Shares	24,695	\$ 30	D	Â

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
CARNASE ANDREW COLEMAN C/O ONEBEACON INSURANCE GROUP, LTD. ONE BEACON STREET BOSTON, MA 02108	Â	Â	Sr. VP, OneBeacon Ins. Co.	Â			

#### **Signatures**

/s/ Thomas L. Forsyth, Attorney-in-Fact

\*\*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).

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.

Reporting Owners 2