Edgar Filing: THIELE PATRICK A - Form 4

THIELE PA Form 4	TRICK A											
August 08, 2	2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
Washington, D.C. 20549								JIVIIVIISSIUN	OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 c	ger o STATEN 16. or	STATEMENT OF CHAN							Expires: Estimated a burden hour response	•		
Form 5 obligations may continue. See Instruction 1(b). 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 Sect 30(h) of the Investment Company Act of 1940							1935 or Section	I				
(Print or Type]	Responses)											
1. Name and Address of Reporting Person <u>*</u> THIELE PATRICK A			8					5. Relationship of Reporting Person(s) to Issuer				
	(Check all applicable)											
	(First) (1 CON INSURANC TD., 605 HIGHW			f Earliest T Day/Year) 2017	ransaction			_X_ Director Officer (give t below)	itle 10% Othe below)	Owner r (specify		
				onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
PLYMOUT	TH, MN 55441							Form filed by M Form filed by M Person				
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)) 5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Class A				Code V	Amount	(A) or (D)	Price \$	Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
Common Shares	08/07/2017			S	20,146	D	φ 18.161 (<u>1)</u>	0	D			

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, 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. Transact Code (Instr. 8)	5. iorNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Tit Amou Unde Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
THIELE PATRICK A ONEBEACON INSURANCE GROUP, L 605 HIGHWAY 169 NORTH PLYMOUTH, MN 55441	LTD.	X						
Signatures								
/s/ Sarah A. Kolar, Attorney-in-Fact	08/08/	2017						
**Signature of Reporting Person	Date	e						

Explanation of Responses:

* 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).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$18.155 to \$18.175. The reporting person undertakes to provide to OneBeacon Insurance Group, Ltd., any security holder of OneBeacon

(1) Insurance Group, Ltd., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

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.