HANOVER INSURANCE GROUP, INC.

Form 4

February 25, 2014

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

OMB Number:

3235-0287

2005

0.5

Check this box if no longer subject to

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires:

OMB APPROVAL

Estimated average burden hours per

response...

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **BOOTH RICHARD H** Issuer Symbol HANOVER INSURANCE GROUP, (Check all applicable) INC. [THG] (Last) (First) (Middle) 3. Date of Earliest Transaction X_ Director Officer (give title (Month/Day/Year)

02/25/2014

C/O HANOVER INSURANCE GROUP, INC., 440 LINCOLN

STREET

(Street) 4. If Amendment, Date Original

(Month/Day/Year)

Filed(Month/Day/Year)

(Instr. 8)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

WORCESTER, MA 01653

(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deemed

(Month/Day/Year)

3. 4. Securities Acquired (A) 5. Amount of Execution Date, if Transactionr Disposed of (D) Code (Instr. 3, 4 and 5)

Securities Beneficially

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Form:

(I)

(Instr. 4)

7. Nature of Ownership Indirect Beneficial Direct (D) Ownership or Indirect (Instr. 4)

10% Owner

Other (specify

(A)

Code V Amount (D) Price Transaction(s) (Instr. 3 and 4)

Owned

Following

Reported

Common Stock

Security

(Instr. 3)

02/25/2014

P 500

\$ 58.1928

500 (1) 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)

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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transact Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	:		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

BOOTH RICHARD H

C/O HANOVER INSURANCE GROUP, INC.
440 LINCOLN STREET

WORCESTER, MA 01653

Signatures

/s/ Matthew R. Frascella pursuant to Confirming Statement

02/25/2014

**Signature of Reporting Person

Date

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).
- (1) Does not include 1,228 shares held indirectly in a Rabbi Trust pursuant to deferral agreements.

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.

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