HANOVER INSURANCE GROUP, INC.

Form 4 March 12, 2014

FORM 4

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

OMB Number: 3235-0287

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

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

burden hours per response... 0.5

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1(b).

(Print or Type Responses)

	1. Name and A Stuchbery F	Address of Reporting I Robert A	Person * 2. Issu Symbol	er Name an	d Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer					
			HANC INC. [SURANCE GROUP,	(Che	ck all applicable	e)			
(Last) (First) (Middle)			, 5.24.6	of Earliest T Day/Year)	ransaction	Director 10% Owner Officer (give title Other (specify					
	440 LINCO	DLN STREET, E-1	03/10/2	2014		below) below) President & CEO, Chaucer					
		(Street)	4. If Am	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Me	onth/Day/Yea	ur)	Applicable Line) _X_ Form filed by One Reporting Person					
	WORCEST	TER, MA 01653					Form filed by More than One Reporting Person				
	(City)	(State)	(Zip) Tal	ole I - Non-	Derivative Securities Acq	quired, Disposed o	f, or Beneficial	lly Owned			
	1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6.	7. Nature o			
	Security	(Month/Day/Year)	Execution Date, if	Transacti	ion(A) or Disposed of (D)	Securities	Ownership	Indirect			
	(Instr. 3)		any	Code	(Instr. 3, 4 and 5)	Beneficially	Form: Direct	Beneficial			
			(Month/Dav/Year)	(Instr. 8)		Owned	(D) or	Ownership			

	Tuble 1 1 (on Berryany e Securities required, Bisposed of, or Beneficiary e whea									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	03/10/2014		F(1)	6,293	D	\$ 59.66	30,045	D		
Common Stock	03/11/2014		A(2)	4	A	\$ 59.66	345	I	By Trustee of The Chaucer Share Incentive Plan	
Common Stock	03/11/2014		A	8 (3)	A	\$ 59.66	353	I	By Trustee of The Chaucer Share	

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Incentive Plan

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.

SEC 1474

(9-02)

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)	4. Transact Code (Instr. 8)	5. iofNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S	ate	Amou Under Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secun 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

Stuchbery Robert A 440 LINCOLN STREET E-10

President & CEO, Chaucer

WORCESTER, MA 01653

Signatures

/s/ Matthew R. Frascella pursuant to Confirming
Statement

03/12/2014

**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) Represents shares that were forfeited to pay withholding taxes upon the vesting of restricted stock units that were previously granted by the Issuer.
- (2) Purchase of shares under The Chaucer Share Incentive Plan.

Reporting Owners 2

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(3) Matching shares under The Chaucer Share Incentive Plan; subject to vesting requirements.

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.