HANOVER INSURANCE GROUP, INC.

Form 4

November 06, 2013

FORM 4

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

OMB Number:

response...

3235-0287 January 31,

0.5

Check this box if no longer

if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: 2005
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OMB APPROVAL

Form 4 or Form 5

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).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> EPPINGER FREDERICK H

2. Issuer Name **and** Ticker or Trading

5. Relationship of Reporting Person(s) to

Symbol

HANOVER INSURANCE GROUP,

(Check all applicable)

INC. [THG]

(First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)

_X__ Director _____ 10% Owner ____ X__ Officer (give title _____ Other (specify

THE HANOVER INSURANCE

(Zip)

11/05/2013

below) below)
President & CEO

GROUP, INC., 440 LINCOLN ST

(Street)

(State)

4. If Amendment, Date Original

 Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

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

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

Issuer

WORCESTER, MA 01653

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1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securities Acquired (A) onor Disposed of (D)			5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)	(· · · · · · · · · · · · · · · · · · ·	any	Code	* ` '			Beneficially	Form:	Beneficial
,		(Month/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership
		•					Following	or Indirect	(Instr. 4)
					(4)		Reported	(I)	
					(A) or		Transaction(s)	(Instr. 4)	
			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	11/05/2013		M(1)	150,000	A	\$ 36.88	306,251	D	
Common Stock	11/05/2013		F(1)	120,048	D	\$ 59.31	186,203	D (2)	

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

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SEC 1474

(9-02)

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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. Transactio Code (Instr. 8)	5. Number of ionDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
Common Stock Option (right to	\$ 36.88	11/05/2013		M <u>(1)</u>		150,000	<u>(3)</u>	02/27/2014	Common Stock	150,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
EPPINGER FREDERICK H THE HANOVER INSURANCE GROUP, INC. 440 LINCOLN ST WORCESTER, MA 01653	X		President & CEO			

Signatures

buy)

/s/ Walter H. Stowell pursuant to Confirming
Statement

11/06/2013

**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).
- Mr. Eppinger "net exercised" 150,000 options. The options were granted to Mr. Eppinger on 2/27/04, and were scheduled to expire on (1) 2/27/14. A total of 120,048 shares were withheld by the Company to satisfy the exercise price and taxes associated with the exercise, resulting in a net issuance of 29,952 shares to, and held by, Mr. Eppinger.
- (2) Does not include 160,362 shares held indirectly in a Rabbi Trust pursuant to deferral agreements.
- (3) 25% of the options vested on 2/27/05. 25% of the options vested on 2/27/06, and the remaining 50% of the options vested on 2/27/07.

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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