HANOVER INSURANCE GROUP, INC.

Form 4

June 12, 201	13									
FORM	Λ 4						OMB A	PPROVAL		
	UNITED STAT	ES SECURITIES Washingto			GE C	OMMISSION	OMB Number:	3235-0287		
Check the if no lon	ger						Expires:	January 31, 2005		
subject to Section 1 Form 4 c	STATEMENT 16.	OF CHANGES I SECU	N BENEI JRITIES	FICIAL	OWN	ERSHIP OF	Estimated a burden hou response	average Irs per		
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 Section 30(h) of the Investment Company Act of 1940										
(Print or Type	Responses)									
Stuchbery Robert A Symbol			and Ticker o			5. Relationship of Reporting Person(s) to Issuer				
		HANOVER IN INC. [THG]	ISURAN	JE GRO	OUP,	(Check all applicable)				
(Last)	(First) (Middle)	3. Date of Earliest (Month/Day/Year		1		Director 10% Owner X Officer (give title Other (specify				
440 LINCO	DLN STREET, E-10	06/11/2013				below) below) President & CEO, Chaucer				
	(Street)	4. If Amendment, Filed(Month/Day/Y	_	ıal		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
WORCEST	TER, MA 01653					_X_ Form filed by C Form filed by M Person				
(City)	(State) (Zip)	Table I - Nor	n-Derivativ	e Securitie	es Acqu	ired, Disposed of	, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	any	tion Date, if Transac Code h/Day/Year) (Instr. 8	Transaction(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4)			
Common Stock	06/11/2013	A <u>(1)</u>	4	` ,	8 18.55	244	I	By Trustee of The Chaucer Share Incentive Plan		
Common Stock	06/11/2013	A(2)	8	A \$	6.0	252	I (3)	By Trustee of The Chaucer Share		

Share Incentive Plan

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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)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	nt of	Derivative	
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed	(Month/Day/		Under Securi (Instr.	, ,	Security (Instr. 5)	
					of (D) (Instr. 3, 4, and 5)				Amount		
					(4)	Date Exercisable	Expiration Date	Title	Amount or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Stuchbery Robert A 440 LINCOLN STREET E-10 WORCESTER, MA 01653

President & CEO, Chaucer

Signatures

Walter H. Stowell, pursuant to Confirming

Statement 06/12/2013

**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).
- (1) Purchase of shares pursuant to The Chaucer Share Incentive Plan.
- (2) Matching Shares pursuant to The Chaucer Share Incentive Plan; subject to vesting requirements.
- (3) Does not include 23,650 shares held directly by Reporting Person.

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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