#### CONDRON P KEVIN

Form 4

January 28, 2019

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 3235-0287

Number:

Expires:

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2005

0.5

Estimated average

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Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* **CONDRON P KEVIN** 

2. Issuer Name and Ticker or Trading Symbol

Issuer

HANOVER INSURANCE GROUP,

(Check all applicable)

5. Relationship of Reporting Person(s) to

INC. [THG]

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

X\_ Director Officer (give title

10% Owner Other (specify

C/O THE HANOVER INSURANCE 01/02/2019 GROUP, INC., 440 LINCOLN

STREET

1 Title of

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

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)

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

1. Title	10	2. Transaction Date 2A. Deemed		3.		4. Securities			5. Amount of 6.		/. Nature of	
Security	7	(Month/Day/Year)	Execution Date, if	TransactionAcquired (A) or				r	Securities	Ownership	Indirect	
(Instr. 3	)		any	Code Disposed of (D)			Beneficially	Form: Direct	Beneficial			
			(Month/Day/Year)	(Instr.	8)	(Instr. 3, 4 and 5)		Owned	(D) or	Ownership		
								Following	Indirect (I)	(Instr. 4)		
							(4)		Reported	(Instr. 4)		
							(A)		Transaction(s)			
				C- 1-	V	A	or	D	(Instr. 3 and 4)			
~				Code	V	Amount	(D)	Price			<b>5</b> 0 1	
Comm	ion	01/02/2019		<b>J</b> (1)	V	1,467	D	\$0	3,218	Ţ	Deferral	
Stock		01/02/2017		<u></u>	•	1,707	ט	(1)	3,210	1	Agreement	
								Φ.0				
Comm	ion	01/02/2019		<b>J</b> (1)	V	1,467	Δ	\$0	22,200	D		
Stock		01/02/2017		<u></u>	•	1, 107	1 1	(1)	22,200	D		

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	Expiration Date		t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivativ		e		Securit	ies	(Instr. 5)	Bene
	Derivative			Securities				(Instr. 3	3 and 4)		Own
	Security	curity Acquired									Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or Number		
						Exercisable	Date	Title Numbe			
				C + V	(A) (D)						
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

10% Owner Officer Other Director

**CONDRON P KEVIN** C/O THE HANOVER INSURANCE GROUP, INC. 440 LINCOLN STREET WORCESTER, MA 01653

X

# **Signatures**

/s/ Matthew R. Frascella pursuant to Confirming Statement

01/28/2019

\*\*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).
- Change of ownership from indirect to direct pursuant to the terms of a deferral agreement for stock previously awarded (but deferred) under the Issuer's 2014 Long-Term Incentive Plan.

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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