Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form às it may be made public.

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information.

F	orvea	lendar year 2017 or tax year beginning		, 2017,	and ending	9			, 20
		of foundation				AE	mployer identifi	cation number	
•	The	Hanover Insurance Group Four	dation, Inc.				04-31056	50	
1	dumbe	er and street (or P O box number if mail is not delivered	to street address)		Room/suite	ВТ	elephone numbe	er (see instruction	ns)
				ĺ		1			,
4	40	Lincoln Street							
(City or	town, state or province, country, and ZIP or foreign posi-	tal code			1			//
							exemption applicated application applicati		. ▶□
1	More	cester, MA 01653							
G	Che	ck all that apply Initial return	Initial return	of a former p	ublic charity	у р 1	Foreign organizat	ions, check here	. ▶∐
		Final return	Amended re	turn		2	Foreign organizat		
		Address change	Name chang				85% test, check h computation		. ▶∐
H	Che	ck type of organization X Section 501(c)(3) exempt private f	oundation	M	l _{E If}	private foundation	n status was termina	ated
1		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr		ion 🗡	ſ	•)(1)(A), check here	► 1 1
I	Fair	market value of all assets at JAcco	unting method $oxed{X}$ C	ash [] Acc	rual 🐧	Fif	the foundation is	ın a 60-month termi	nation
	end		ther (specify)			_ "	nder section 507(b)	(1)(B), check here	. ▶ []
	16)	▶ \$ 4,358,000 (Part I,	column (d) must be on ca	sh basis)				,	
C	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Not in in	etment	(a) A a	uicted net	(d) Disburs for chari	
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inve			justed net come	purpos	ses
_		column (a) (see instructions))	books					(cash basi	s only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,000,000						
	2	Check ► If the foundation is not required to attach Sch B		<u> </u>					
	3	Interest on savings and temporary cash investments.	49		49				
	4	Dividends and interest from securities	87,963	8	7,963				
	5a	Gross rents				l	REC	EIVED	
	b	Net rental income or (loss)							181
악	6a	Net gain or (loss) from sale of assets not on line 10					₩AY	1 7 2019	Ö
evenue	b	Gross sales price for all assets on line 6a					8 ""	1 / 2010	10
₹	7	Capital gain net income (from Part IV, line 2) .					OGE	ENLIT	- =
Ľ	8	Net short-term capital gain					OGL	E14, 01	
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold .							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
_	12	Total. Add lines 1 through 11	1,088,012	8	8,012				
æ	13	Compensation of officers, directors, trustees, etc.							
Ses	14	Other employee salaries and wages							
ens	15	Pension plans, employee benefits							
Š	16a	Legal fees (attach schedule)						<u> </u>	
O)	b	Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy							
⋛	С	Other professional fees (attach schedule)		<u> </u>					
Ē	17	Interest		 				 	
Ē	18	Taxes (attach schedule) (see instructions)	300		300			<u> </u>	
Ē	19	Depreciation (attach schedule) and depletion.						ļ	
ď.				 				ļ	
ַ	21 22	Travel, conferences, and meetings		<u> </u>				ļ	
ā	22	Printing and publications		<u> </u>				ļ	40 101
50	23 24 25	Other expenses (attach schedule)	48,191	 				} ²	18,191
rati	24	Total operating and administrative expenses.	10 101		200				40 101
ĕ		Add lines 13 through 23	48,491	<u> </u>	300				18,191
0		Contributions, gifts, grants paid	2,177,737	<u> </u>	- 300				77,737
_	26	Total expenses and disbursements Add lines 24 and 25	2,226,228	 	300			2,22	25,928
	27	Subtract line 26 from line 12	(1 130 015)						
		Excess of revenue over expenses and disbursements	(1,138,216)	 	7 770			 	
		Net investment income (if negative, enter -0-)		8	7,712				
_		Adjusted net income (if negative, enter -0-).		L				- 000	-PF (2017)
~(, rrai	perwork Reduction Act Notice, see instructions.		Л	10			Form 990.	⇒(C (2017)

_		PF (2017)	Attached schedules and amounts in the	Beginning of year	En	nd of year
Ρ	art II	Balance Sheets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bear	ng	(92,774)	51,04	7 51,047
			cash investments			
		Accounts receivable				
		Less allowance for dou	btful accounts ▶			
	4	Pledges receivable ▶_				-
		Less allowance for dou	btful accounts ▶			
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other]		
		disqualified persons (at	tach schedule) (see instructions) L			
	7	Other notes and loans r	eceivable (attach schedule) > 000,000		1 000 00	7 000 000
		Less allowance for dou	btful accounts ►	1,000,000	1,000,00	0 1,000,000
ssets	8	Inventories for sale or us	:e			
SS	9	Prepaid expenses and d	eferred charges			
⋖	1		e government obligations (attach schedule)	4,189,382	3,306,95	3 3,306,953
			stock (attach schedule)	4,109,302	3,306,33	3,300,933
	11	Investments - corporate Investments - land, building	e bonds (attach schedule)			
	ļ	and equipment basis Less accumulated depreca		j		
	}	(attach schedule)	·			
			loans			
	14	Land, buildings, and	ach schedule)			
	}	equipment basis Less accumulated deprecia	ation	}		1994 t. P. 460 1 11-
	\	(attach schedule)	•			
			completed by all filers - see the			
	I		age 1, item I)	5,096,608	4,358,00	0 4,358,000
_			accrued expenses			
		• •	·			
S	I					
Ĭ	20		ors, trustees, and other disqualified persons.			
Liabilities	21	Mortgages and other no	otes payable (attach schedule)			
Ï	22	Other liabilities (describe	e▶)			
	1					
_			es 17 through 22)			
S			w SFAS 117, check here ▶	1		
ë	1	and complete lines 24	through 26, and lines 30 and 31.	}		}
alances	24	Unrestricted				
Ba	25	Temporarily restricted				
덛	26					
豆	26 27 28 29 30 31	Foundations that do not and complete lines 27	ot follow SFAS 117, check here ▶			
5	27		cipal, or current funds	1		
ŧ	28		r land, bldg, and equipment fund			ᅱ
SSe	29		ulated income, endowment, or other funds	5,096,608	4,358,00	10
۲	30	-	d balances (see instructions)	5,096,608	4,358,00	0
Ž	31		net assets/fund balances (see			7
_	İ			5,096,608	4,358,00	00
Ŀ	art II		nges in Net Assets or Fund Bala	nces		
1			palances at beginning of year - Part I			
			ed on prior year's return)			5,096,608
			, line 27a			2 (1,138,216)
			ded in line 2 (itemize) ▶			399,60
					 	4 4,358,00
		reases not included in		line E) Dort II as live a fire		5 6 4,358,00
_0	10(2	ii net assets or fund b	palances at end of year (line 4 minus	iiile 5) - Part II, column (b), iine 30 (6 4,358,000

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	and Losses for Tax on Inve		/b\ Hau	,	
	scribe the kind(s) of property sold (for exrick warehouse, or common stock, 200 s		(b) How acquired P - Purchase		(d) Date sold (mo , day, yr)
1 a			D - Donation		
b				 	
С				f	
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (los ((e) plus (f) mini	
a					
b					
С					
d					
е					
Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) ga	in minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less the Losses (from col	
a					
b		 			
С					
d					
					
2 Capital gain net income		in, also enter in Part I, lìne 7			
· -	(11 (10	ss), enter -0- in Part I, line 7	2		
	ain or (loss) as defined in sections	<u> </u>	[
-	art I, line 8, column (c) See inst		_ }		
	100000000000000000000000000000000000000		3		
	Jnder Section 4940(e) for Red				
(For optional use by domestic	c private foundations subject to the	section 4940(a) tax on net investr	nent inco	me)	
If a sales = 40.40(d)(0) = = 1	In according to A billion				
If section 4940(d)(2) applies,	leave this part blank				
Was the foundation liable for	the section 4942 tax on the distribi	utable amount of any year in the ha	se nerio	12	Yes X No
	n't qualify under section 4940(e) D		ase perior		1 163 [] 110
	nount in each column for each yea		ng anv en	tries	
(a)	(b)	(c)	3 - 7 -	(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2016	2,216,623	5,476,663		·	0.4047
2015	1,734,530	5,934,256		· · · · · · · · · · · · · · · · · · ·	0.2923
2014	2,470,572	6,179,051			0.3998
2013	1,874,915	5,824,075			0.3219
2012	1,414,449	4,393,428			0.3219
2 Total of line 1, column (d)		2		1.7406
	o for the 5-year base period - divide				
the number of years the	foundation has been in existence if	fless than 5 years	3		0.3481
			}		_
4 Enter the net value of no	oncharitable-use assets for 2017 fr	om Part X, line 5	4	4	1,656,393
5 Multiply line 4 by line 3.			5		L,620,890
		1			
6 Enter 1% of net investm	ent income (1% of Part I, line 27b).		6		877
7 Add lines 5 and 6			7		L,621,767
				_	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	ions from Part XII, line 4		8		2,225,928
Part VI instructions	reater than line 7, check the box	ııı raπ vi, iine 1b, and complete	inat par	t using a 1% ta	ix rate see th

orm	990-PF (2017)			age 4
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ictions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			_
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b,	Domestic foundations that meet the section 4940(e) requirements in Part V, check			B77
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			377
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			377
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
6	Credits/Payments 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 1, 905			
a	25 // Godinated text perfection and 25 /5 Steepersmont Greated to 25 //			
b	Exempt foreign organizations tax withhold at coarse.			
Ç	Tex pare with appropriation of extension of time to the (Form coop),			
d	Backup withholding erroneously withheld		1,9	905
7 8	Total credits and payments Add lines 6a through 6d			
_				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1.0	028
10 11	Enter the amount of line 10 to be Credited to 2018 estimated tax > 1,028 Refunded > 11			
_	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Ţ	Yes	No
	participate or intervene in any political campaign?	1a	100	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	 		
-	instructions for the definition	16		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	1	1	
С	Did the foundation file Form 1120-POL for this year?	1c	ļ	X
	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$(2) On foundation managers ►\$	ll		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		_X_
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		Ì	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	46		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T		. }	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		}	
	By language in the governing instrument, or		ļ	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
Þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	.	x	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			•
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,"			Х
	complete Part XIV	9		
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1 . 1		y
	names and addresses	10		Х

orm 990-PF (2017)			
Part VII-A Statements Regarding Activities (continued)		Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	- [ļ	
	11		_X_
meaning of section 512(b)(13)? If "Yes," attach schedule See Instructions. 'meaning of section 512(b)(13)? If "Yes," attach schedule See Instructions. 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
12 Did the foundation make a distribution to a dollor advised fully over this are	12		_X
person had advisory privileges? If "Yes," attach statement See instructions	13	_X	
person had advisory privileges? If tes, attach statement occumulations of its annual returns and exemption application? [13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			
Website address ► PAUL A BELSITO Telephone no ► 508-855-1	1000		
14 The books are in cally a TINCOLN STREET WORCESTER MA			
The books are in care of Lincoln STREET WORCESTER MA Located at 440 LINCOLN STREET WORCESTER MA ZIP+4 01653 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	· []
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in fled of Form 154		_	
and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
and enter the amount of tax-exempt interest received of according to your annual property and enter the amount of tax-exempt interest received of according to your annual property. 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority.	16_		X
over a bank, securities, or other financial account in a foreign country. See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
the foreign country			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
1a During the year, did the foundation (either directly or indirectly) Yes X No			1
(4) France in the sale or exchange, or leasing of property with a disqualified person?			
(2) Borrow money from lend money to, or otherwise extend credit to (or accept it money in X)		1	1
the weblifted person?			
(a) Fundable goods, services, or facilities to (or accept them from) a disqualified person?	1		
(4) Bay composition to or pay or reimburse the expenses of, a disqualified person?	1		
(5) Transfer any income or assets to a disqualified person (or make any or either available to.		1	
the handst or use of a disqualified person)?	1		
(6) Agree to pay money or property to a government official? (Exception, Check No ii the	1		
foundation agreed to make a grant to or to employ the official for a period area.			
f terminating within 90 days)			
termination of government service, in terminating within 55 days. b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations.	1b		1_
to 40.44(d) 3 or in a current notice regarding disaster assistance? See instructions.			\top
			_ _
and the state of the acts described in ta, other man state of the acts described in ta, other man	10		2
the first day of the tay year beginning in /U1//			
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation that a			
At the end of tay year 2017, did the foundation have any undistributed income (lines od and			
6e, Part XIII) for tax year(s) beginning before 2017?			
If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) to			
(in applying desired valuation of assets) to the year's undistributed income (in applying desired)	1	,	
" and attach statement - see instructions)	·	\top	\top
all years listed, answer "No and attach statement so institute as inst			
·			
26 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
	.	1	
the state of the s			
the Man 26 1060 /2) the lanse of the 5-year period (or longer period approved as	- 1		
the 10 15 or 20-year first phase holding period? (Use Schedule C, rolli 4720, to determine	<u>ا</u> م	<u>_</u> _	- -
			\dashv
The foundation revises during the year any amount in a manner that would jeopardize its character perpetuits	_	a	-+
	s l_		
b Did the foundation invest during the year any embedding the year any embedding the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017.		b	ı

	990-PF (2017) † VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)			Page (
	During the year, did the foundation pay or incur any ame					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	1 4945(e))?	. Yes X N	o		
•	(2) Influence the outcome of any specific public ele	ection (see section 4	955), or to carry or	u, — (25)			
	directly or indirectly, any voter registration drive?				· 1		}
	(3) Provide a grant to an individual for travel, study, or o				٥		
	(4) Provide a grant to an organization other than a				_		
	section 4945(d)(4)(A)? See instructions			'es ''	°		}
	(5) Provide for any purpose other than religious, of purposes, or for the prevention of cruelty to children						
b	If any answer is "Yes" to 5a(1)-(5), did any of the			• 🗀	- 1		1
	Regulations section 53 4945 or in a current notice regain				í	'	Í
	Organizations relying on a current notice regarding disa	ster assistance, check	here		. 🗆 🗀		
С	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the t	tax	1		
	because it maintained expenditure responsibility for the	grant?		. Yes X N	0	}]
	If "Yes," attach the statement required by Regulations s	ection 53 4945-5(d)					ļ
6a	Did the foundation, during the year, receive any fur	•	. , . ,				
	on a personal benefit contract?				1	}	x
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	act ² ,	· 6b		<u> </u>
	If "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a p	activities a meabilisted tox	shaltar transaction?	Yes X N	_	}	}
/a b	If "Yes," did the foundation receive any proceeds or ha				. 7ь	ł	ł
_	Information About Officers, Directo					'	L
1	and Contractors List all officers, directors, trustees, foundation	managers and their	compensation. Sec	e instructions.			
·	2,01 2 011101.0, 11101.0, 11101.0, 1011.111.11						
	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)		(e) Expension		
EE	(a) Name and address STATEMENT 2	hours per week	(If not paid,	(d) Contributions to employee benefit plans			
SEE		hours per week	(If not paid,	(d) Contributions to employee benefit plans			
EE		hours per week	(If not paid,	(d) Contributions to employee benefit plans			
SEE		hours per week	(If not paid,	(d) Contributions to employee benefit plans			
SEE		hours per week	(If not paid,	(d) Contributions to employee benefit plans			
SEE		hours per week	(If not paid,	(d) Contributions to employee benefit plans			
SEE		hours per week	(If not paid,	(d) Contributions to employee benefit plans			
2		hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other al	owance	
2	STATEMENT 2 Compensation of five highest-paid employees	hours per week devoted to position	(If not paid, enter -0-)	e 1 - see instruct (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred	other al	one,	ente
2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	nours per week devoted to position (other than thos	enter-0-) enter-o-)	(d) Contributions to employee benefit plans and deferred compensation e 1 - see instruct (d) Contributions to employee benefit	ions). If n	one,	ente
2 (a)	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	nours per week devoted to position (other than thos	enter-0-) enter-o-)	e 1 - see instruct (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred	ions). If n	one,	ente
2	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	nours per week devoted to position (other than thos	enter-0-) enter-o-)	e 1 - see instruct (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred	ions). If n	one,	ente

Part VIII,	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	yees,
3 · Five I	nighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	er of others receiving over \$50,000 for professional services	
		
Part IX-A	Summary of Direct Charitable Activities	
	ndation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of is and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1		
'		ļ
2		
-		
3		
-		
		}
4		
·		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	— 	
		}
2		
]
All other pr	ogram-related investments. See instructions	
3		
		[
Total. Add	ines 1 through 3	
		Form 990-PF (2017

Pai	rt X	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundations,	
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,	} }	
		oses	1	(20, 054)
а		age monthly fair market value of securities	1a	(20,864)
b		age of monthly cash balances	1b	3,748,167 1,000,000
С		market value of all other assets (see instructions)	1c	4,727,303
d	Tota	ıl (add lines 1a, b, and c)	1d	4,727,303
е		uction claimed for blockage or other factors reported on lines 1a and		
	1c (a	attach detailed explanation)		
2		uisition indebtedness applicable to line 1 assets	2	4,727,303
3	Sub	tract line 2 from line 1d	3	4,727,303
4		deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	1 4	70 010
		uctions)	4	70,910
5		value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	
6		mum investment return. Enter 5% of line 5	6	232,820
Pai	rt XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	ndations	
		and certain foreign organizations, check here ▶ and do not complete this part)		232,820
1		mum investment return from Part X, line 6	}- <mark>-</mark> -}	232,620
		on investment income for 2017 from Part VI, line 5	1	
b		me tax for 2017 (This does not include the tax from Part VI) 2b	1	877
С		lines 2a and 2b	2c	231,943
3		ributable amount before adjustments Subtract line 2c from line 1	3	231, 343
4		overies of amounts treated as qualifying distributions	5	231,943
5		lines 3 and 4	6	231,943
6		uction from distributable amount (see instructions)	 	
7		ributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 1	7	231,943
Pa		Qualifying Distributions (see instructions)	<u> </u>	
				
1		ounts paid (including administrative expenses) to accomplish charitable, etc., purposes	}	
а		enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,225,928
þ		gram-related investments - total from Part IX-B	1b	
2	Amo	ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	i i	
		oses	2	
3		ounts set aside for specific charitable projects that satisfy the	{ _	
		ability test (prior IRS approval required)	3a	
b		h distribution test (attach the required schedule)	3b	2 225 222
4		ifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,225,928
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
_		er 1% of Part I, line 27b See instructions		2 225 222
6		usted qualifying distributions. Subtract line 5 from line 4		2,225,928
	Note	e: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating whether	the foundation
		qualifies for the section 4940(e) reduction of tax in those years		000 DE (0017)

Form	990-PF (2017)				Page 9
Pa	rt XIII Undistributed Income (see instr	uctions)			
•		(a)	(b)	(c)	(d) 2017
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	
	line 7			ļ	231,943
2	Undistributed income, if any, as of the end of 2017			}	
а	Enter amount for 2016 only			<u> </u>	
	Total for pnor years 20,20,20			 	
	Excess distributions carryover, if any, to 2017				
	From 2012				
	2 162 526			(
	1 420 000			1	
	1 042 030			1	
	FIGHT 2010	8,328,311			
	Total of lines 3a through e	0,320,311		 	
4	Qualifying distributions for 2017 from Part XII, line 4 > \$				
		I			
	Applied to 2016, but not more than line 2a			<u> </u>	
b	Applied to undistributed income of prior years (Election required - see instructions)				
	`				
С	Treated as distributions out of corpus (Election required - see instructions)	,	ļ		
	Applied to 2017 distributable amount				231,943
	Remaining amount distributed out of corpus	1,993,985		 	
	Excess distributions carryover applied to 2017				
•	(If an amount appears in column (d), the same				
_	amount must be shown in column (a))]	
•	Enter the net total of each column as indicated below:			Į į	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,322,296			
b	Prior years' undistributed income Subtract			!	
	line 4b from line 2b			 	
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has			İ	
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			 	
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions				
	4a from line 2a Taxable amount - see instructions		1	}	
	instructions			 	
f	Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be		1		}
	distributed in 2018		1	ļ	
7	Amounts treated as distributions out of corpus			[
•	to satisfy requirements imposed by section		1		
	170(b)(1)(F) or 4942(g)(3) (Election may be			}	
	required - see instructions)				
8	Excess distributions carryover from 2012 not			}	
	applied on line 5 or line 7 (see instructions)	1,196,777		 	
9	Excess distributions carryover to 2018.	0 105 510	,	1	
	Subtract lines 7 and 8 from line 6a	9,125,519	 	 	
	Analysis of line 9 Excess from 2013 1,585,230				
	Excess from 2014				
	Excess from 2016				
	Excess from 2017		-		
			<u> </u>		Form 990-PF (2017)

	990-PF (2017)	anating Farmed attack	. /	Dord V/II A myses	ion (1)			Page 10
				and Part VII-A, quest				/
1 a	If the foundation has						,	p
	foundation, and the ruling					4942(J)	(3) 05/	4942(j)(5)
ij.	Check box to indicate v	Tax year	is a private operating	Prior 3 years	1 Section	1 40420)	(0 / 0 /-	1 4342()(3)
2 a	Enter the lesser of the ad-	(a) 2017	(b) 2016	(c) 2015	(d) 20	14	(e)) Total
	justed net income from Part I or the minimum investment		(0) 2010	(0)2013	- (a) 20			
	return from Part X for each				[
	year listed		 			/		
	85% of line 2a	 		 	 			
С	Qualifying distributions from Part XII, line 4 for each year listed .				/			
d	Amounts included in line 2c not used directly for active conduct		,					
e	of exempt activities							
-	directly for active conduct of				1			
	exempt activities Subtract line 2d from line 2c	}			}			
3	Complete 3a, b, or c for the							
	alternative test relied upon "Assets" alternative test - enter							
a	(1) Value of all assets	}]			
	(2) Value of assets qualifying	ļ		//				
	under section		/	z ²)			
b	4942(j)(3)(B)(i)	ļ						
	enter 2/3 of minimum invest-	[{			
	ment return shown in Part X,				{			
С	"Support" alternative test - enter	<u> </u>		 	 			
	(1) Total support other than				ł			
	gross investment income (interest, dividends, rents,	}			1			
	payments on secunties	}			1			
	loans (section 512(a)(5)), or royalties)	1			Į			
	(2) Support from general			 	 			
	public and 5 or more exempt organizations as							
	provided in section 4942							
	(j)(3)(B)(III)			 				
	port from an exempt organization							
	(4) Gross investment income							
Pa	rt XV Supplemer	ntary Information (Complete this part	only if the founda	tion had \$	5,000 or	more in	n assets at
	any time d	uring the year - see	instructions.)					
1	Information Regarding							
а	List any managers of	the foundation who I	nave contributed mo	re than 2% of the tot	al contribution	ns receiv	ed by the	e foundation
	before the close of any	tax year (but only if the	ney have contributed	more than \$5,000) (S	iee section 50)7(d)(2))		
b	List any managers of					an equally	large po	ortion of the
	ownership of a partner	ship or other entity) o	f which the foundatio	n has a 10% or greate	r interest			
2	Information Regarding	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:				
	Check here ▶ if t	he foundation only	makes contributions	to preselected char	ritable organ	izations a	and does	not accept
	unsolicited requests for	or funds. If the found	ation makes gifts, gr					
	complete items 2a, b,							
а	The name, address, a	nd telephone number	or email address of t	he person to whom ap	plications sho	uld be add	ressed	
PAU	L BELSITO, PRES	SIDENT 440 LINC	OLN STREET WOR	CESTER, MA 0165	53 508-85	5-1000		
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should includ	de		
	FORMAL POLICY H		UED AT THIS TI	ME				
C	Any submission deadli	nes						
	FORMAL POLICY H							
d	Any restrictions or li	mitations on awards	, such as by geogr	raphical areas, charit	able fields,	kınds of	institution	ns, or other
	factors							
NO	FORMAL POLICY H	AS BEEN INCTIT	די פדעי יים חשוו	ME				

Form 990-PF (2017)

JSA 7E1490 1 000

3 Grants and Contributions Paid Duri	If recipient is an individual	oved for r	uluie rayiilelil	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
a Paid during the year		1		2,177,737
SEE STATMENT 3				2,177,737
				[
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Total			▶ 3a	2,177,737
b Approved for future payment				
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Total	L	L	. ▶ 3h	
1 21 (13)			■ 2h	

Unrelated business natures 1 Program service revenue 2 Manuers code 3 December of the control		ant XVI-A Analysis of income-Prod					
Program service revenue a b c d d e f g Fees and contracts from government agencies 2 Membership dues and assessments			(a)	(b)	(c)	(d)	function income
b c d d e e f f g Fees and contracts from government agencies 2 Membership dues and assessments	1	Program service revenue	Business code	Amount	Exclusion code	Allount	(See instructions)
d d e f g Fees and contracts from government agencies 2 Membership dues and assessments		a			- -		
d e f g Fees and contracts from government agencies 2 Membership dues and assessments		b	<u> </u>		_{		
e f g Fees and contracts from government agencies 2 Membership dues and assessments		c	├				
f g Fees and contracts from government agencies 2 Membership dues and assessments		d	<u> </u>				
g Fees and contracts from government agencies 2 Membership dues and assessments		e	 				
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments. 4 Dividends and interest from securities		g Fees and contracts from government agencies	<u> </u>			+	
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities	2	Membership dues and assessments	 		 		
5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 14 See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	3	Interest on savings and temporary cash investments -	 				
a Debt-financed property. b Not debt-financed property. 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events. 10 Gross profit or (loss) from sales of inventory. 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 14 See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the	4	Dividends and interest from securities	}		14	87,363	
b Not debt-financed property	5	• •	ļ+		 		
6 Net rental income or (loss) from personal property 7 Other investment income		a Debt-financed property	<u> </u>				
7 Other investment income		b Not debt-financed property	$\vdash \rightarrow$				
8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e)	6	Net rental income or (loss) from personal property	}		 		
9 Net income or (loss) from special events			 		 		
It Other revenue a b c d d d d d columns (b), (d), and (e)		, ,					
to the revenue a b c c d d e 88,012 12 Subtotal Add columns (b), (d), and (e)		·	 				
b c d			 				
c d e 12 Subtotal Add columns (b), (d), and (e)	11		├				
d e 12 Subtotal Add columns (b), (d), and (e)			├				
e 88,012 12 Subtotal Add columns (b), (d), and (e) 88,012 13 Total. Add line 12, columns (b), (d), and (e) 13 Instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the subtraction of the contributed importantly to the subtraction of the column (e) of Part XVI-A contributed importantly to the column (e) of Part XVI-A contributed importantly			├──┤				
12 Subtotal Add columns (b), (d), and (e)					+		
13 Total. Add line 12, columns (b), (d), and (e)			 			88 012	
See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the second column in the c							88 012
	Li	Explain bolon non caon activit	-				
	_						
	_						
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Part	_	Information R Exempt Organ	legarding Tra	nsfers to ar	nd Transact	ions and	Relations	ships With Non	chari		ge 13
· in	sec	e organization direction 501(c) (other cations?	tly or indirectly e than section	engage in any 501(c)(3) org	of the followir anizations) or	ng with any in section	other orga on 527, re	nization described lating to political		Yes	No
		ers from the reportir	ng foundation to	a noncharitable	e exempt orga	nızatıon of			1		
		sh	_						1a(1)		x
		er assets									Х
ьÒ	ther t	ransactions									Í
		es of assets to a no								1	Х
		chases of assets fro									X
		ntal of facilities, equ									X
		mbursement arrang ins or loan guarante									X
		formance of service									Х
c S	haring	g of facilities, equipr	nent, mailing list	s, other assets	, or paid emplo	yees		. .	1 <u>c</u>		X
		answer to any of th									
		of the goods, other									
		n any transaction of		oncharitable exemi				fers, transactions, and sh			
(a) Line	110	(b) Amount mvoived	(c) Name of the	onchamable exemp	pt organization	(u) Desc	inputon of trains	ers, transactions, and sin	aning and	angerne	4113
			 			<u> </u>					
			1			<u> </u>					
											
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			ļ			<u> </u>					
	$-\downarrow$		ļ			<u> </u>					
						 					
de	escrib	foundation directly ped in section 501(c) complete the follo) (other than sec	tion 501(c)(3))				-		'es [] No
		(a) Name of Organizatio		(6) 190	e or organization			(c) Description of relation	Tarrip		
											
	Luza				 		5			5-01-5-0	
		penalties of penjury, I deci- t, and complete Decleration of						to the best of my knowle	age and	Deller, II	is nue
Sign		Lulla,	to	16/10	19018	PRES	IDENT	May the i			
Here	Sign	ature of officer or trustee		Date	4	Title		with the p		Yes	No
		,									
Paid		Print/Type preparer's na	ame	Preparer's sign	nature		Date	Check If	ΡΠΝ		
	. ro =		 -				<u> </u>	self-employed			
Prepa		Firm's name						Firm's EIN			
Use C	nıy	Firm's address									
		L						Phone no		A 05	

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Name of the organization		Employer identification number				
The Hanover Insuran	04-3105650					
Organization type (check one	;)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a priva	te foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private for	oundation				
	501(c)(3) taxable private foundation					
•	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule a	nd a Special Rule See				
General Rule						
-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, co or property) from any one contributor. Complete Parts I and II. See ins contributions					
Special Rules						
regulations under s 13, 16a, or 16b, an	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form that received from any one contributor, during the year, total contributor the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line	n 990 or 990-EZ), Part II, line utions of the greater of (1)				
contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the year, total contributions of more than \$1,000 exclusively for religional purposes, or for the prevention of cruelty to children or animals. Co	us, charitable, scientific,				
contributor, during contributions totale during the year for General Rule applie	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
990-EZ, or 990-PF), but it mu	isn't covered by the General Rule and/or the Special Rules doesn't file st answer "No" on Part IV, line 2, of its Form 990, or check the box or o certify that it doesn't meet the filing requirements of Schedule B (Forr	n line H of its Form 990-EZ or on its				

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2017)		Page 2
Name of organization The Hanover Insurance Group Foundation, Inc.			Employer identification number 04-3105650
Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	THE HANOVER INSURANCE COMPANY 440 LINCOLN STREET		Person X Payroll Noncash
	WORCESTER MA 10653		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

		T	†
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
JSA		Schedule	B (Form 990, 990-EZ, or 990-PF) (2017)

The Hanover Insurance Group Foundation, Inc.

Employer identification number

04-3105650

Part II	Monicash Property (see instructions) Ose duplicate copies	of Fart II II additional space is nec	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

	nganization Inover Insurance Group Founda	tion Inc		04-3105650					
	Exclusively religious, charitable, etc.		ranizations des						
rart III	(10) that total more than \$1 000 for	the year from any	one contributor.	Complete columns (a) through (e) and					
				of exclusively religious, charitable, etc.					
	contributions of \$1,000 or less for the	e vear (Enter this in	formation once S	See instructions) > \$					
	Use duplicate copies of Part III if addit	ional space is need	ed.						
(a) No				T					
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Faiti	 								
		(e) Transi	er of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held					
Part I	(b) Furpose of gift	(0) 036		(a) bescription of now girls new					
		\		\					
	\	·		\					
		(e) Transi	er of gift						
	T	-1 7ID - 4	Daladia						
	Transferee's name, address, ar	10 ZIP + 4	Relatio	onship of transferor to transferee					
			, 						
									
									
(a) No.									
from Part í	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relatio			onship of transferor to transferee					
									
			<u> </u>						
(a) No.	 		L						
from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I	 			 					
	(e) Transfer of gift								
	Transferee's name, address, ar	Relatio	Relationship of transferor to transferee						

The Hanover Insurance Group Foundation, Inc. 04-3105650 Schedule Attached to and Made Part of Form 990-PF

Part I - Analysis of Revenue and Expenses

Line 18 - Taxes Federal Taxes Paid State Taxes Paid	\$	300	
Line 23 - Other Expenses Operating costs Filing Fees Banking Fees	\$	48,000 15 176 48,191	
Part II - Balance Sheets Line 7 - Other Notes Receivable Contribution Receivable		1,000,000	 2016 1,000,000
<u>Line 10b - Investments</u>	\$	1,000,000	\$ 1,000,000
Vanguard Accounts		3,306,953	 4,189,382
	_\$	3,306,953	\$ 4,189,382

Part III - Analysis of Changes in Net Assets or Fund Balances

Line 3 - Increases

Increase/(Decrease) in Market Value - Vanguard Accts	399,608
Total Increase/(Decrease) in Market Value	\$ 399,608