## Edgar Filing: Employers Holdings, Inc. - Form 4

Employers H Form 4	Ioldings, Inc.										
March 18, 20	)14										
FORM							NCEC		OMB AF	PROVAL	
Check thi	UNITED	SIAIES		hington,			NGE C	COMMISSION	OMB Number:	3235-0287	
if no long	ter							Expires:	January 31, 2005		
subject to Section 1 Form 4 or	6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES						VERSIII OF	Estimated average burden hours per response 0		
Form 4 or Form 5 obligations may continue.response0.5See 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 19400.5											
(Print or Type F	Responses)										
Ownershare Low and T			2. Issuer Symbol	Issuer Name <b>and</b> Ticker or Trading 1bol				5. Relationship of Reporting Person(s) to Issuer			
			Employ	ers Holdii	ngs, Inc.	[EIC	3]	(Chec)	k all applicable	2)	
(Last)	(First) (1	Middle)		Earliest Tra	ansaction						
(Month/Da 10375 PROFESSIONAL CIRCLE 03/16/20			-				Director 10% Owner X Officer (give title Other (specify below) EVP, Chief Legal Officer				
	(Street)		4 If Ame	ndment, Dat	te Origina	1		6. Individual or Jo	-		
Filed(Mor			(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
RENO, NV	89521							Person		1 6	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (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 Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock, par value \$0.01	03/16/2014			F	605	D	\$ 20.34	38,480	D		
Common Stock, par value \$0.01	03/16/2014			F	394	D	\$ 20.34	38,086	D		
Common Stock, par value \$0.01								13,513	I	Ormsby Family Trust	

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.

## 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 Exer	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	/Year)	Underl	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
				coue v	( <i>I</i> ) (D)				5114105		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>			Relationships			
	Director	10% Owner	Officer	Other		
Ormsby Lenard T 10375 PROFESSIONAL CIRCLE RENO, NV 89521			EVP, Chief Legal Officer			
Signatures						
/s/ Lenard T.						

Ormsby	03/18/2014
<u>**</u> 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).

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.