FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | DC | 205/19 |
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| vvasiliilytuii, | D.C. | 20049 |

| TATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
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| l | OMB APPRO | DVAL |
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| l | hours per response: | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Glenn Valerie R | | | | | | 2. Issuer Name and Ticker or Trading Symbol Employers Holdings, Inc. [EIG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|--|--|--|-------|---|---|--------|----------------|---|--|--|---|---|---------------------------|---|---|--|-------|--|---|
| Olemi valene K | | | | | | | | | | | | | | | X | Direct | | | 10% O | |
| (Last) | ` | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/25/2009 | | | | | | | | | | below | r (give title) | | Other (below) | specify |
| 10375 PROFESSIONAL CIRCLE | | | | | | | | | | | | | | | | | | | | |
| (Street) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | |
| RENO | N | V 8 | 39521 | | | X | | | | | | | | X | · ' ' | | | | | |
| | | | | | | | | | | | | | | | | Form Perso | | e tha | n One Repo | orting |
| (City) | (St | tate) (| Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | | e, | 3. Transac Code (In 8) | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | red (A) oi str. 3, 4 a | 4 and Securiti Benefic Owned | | ies For cially (D) Following (I) (| | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | | | v | Amount | (A) or (D) | | • | Transac | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| | 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. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | n of E | | Expi | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | De | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | Code V (A) | | (D) | Date Exer | ate Ex kercisable Da | | piration te | Amor or Numl of Title Share | | | | | | | | | | | |
| Dividend Equivalent Rights | (1) | 03/25/2009 | | | A | | 17 | | | (1) | | (1) | Common Stock, par value \$0.01 | 17 | : | 00.00 | 47 | | D | |

Explanation of Responses:

1. The dividend equivalent rights accrued on deferred stock units previously granted to the reporting person and become exercisable proportionately with the deferred stock units to which they relate. Each dividend equivalent right is the economic equivalent of one share of common stock of Employers Holdings, Inc.

Remarks:

/s/ Valerie R. Glenn

03/26/2009

** Signature of Reporting Person

Date

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

- * 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.

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 Number.