FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

| Name and Address of Reporting Person*     Nelson Ann W   |   |  |   |         |                              |  | 2. Issuer Name and Ticker or Trading Symbol Employers Holdings, Inc. [ EIG ] |       |   |       |                                 |                     |   |                                       |  | ionship of Reporting Pe<br>all applicable)<br>Director<br>Officer (give title   |                | 10% Owner Other (specify   |   |  |
|--|---|--|---|---------|------------------------------|--|--|-------|---|-------|---------------------------------|---------------------|---|---------------------------------------|--|---|----------------|--|---|--|
| (Last)<br>10375 PI                                       | •   | (First) (Middle) DFESSIONAL CIRCLE         |   |         |                              |  | 3. Date of Earliest Transaction (Month/Day/Year) 05/28/2009                  |       |   |       |                                 |                     |   |                                       |  | cycle title Corp. & Public Affairs  |                | `  |   |  |
| (Street) RENO NV 89521 (City) (State) (Zip)              |   |  |   |         | 4. 1                         | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |       |   |       |                                 |                     |   |                                       | )<br>X Form f  Form f                                  | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person |                |  |   |  |
|  |   | Tab  | le I - Nor  | n-Deriv | ativ                         | e Se   | curities   | s Ac  | quired,   | Dis   | posed c                         | of, or              | Bene  | eficiall                              | y Owned  |   |                |  |   |  |
| 1. Title of Security (Instr. 3)  2. Trans: Date (Month/I |   |  |   |         |                              | ear)   | 2A. Deemo<br>Execution<br>if any<br>(Month/Da                                | Date, | Transaction<br>Code (Instr.                             |       |                                 |                     |   |                                       | 5. Amou<br>Securitie<br>Benefici<br>Owned F<br>Reporte | es<br>ally<br>Following   | Form<br>(D) o  | n: Direct<br>or Indirect<br>nstr. 4)                                     | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |   |         |                              |  |  |       | Code  | v     | Amount                          |                     | (A) or<br>(D)   | Price                                 | Transaci<br>(Instr. 3                                  | ion(s)  |                |  |   |  |
| Common Stock, par value \$0.01 05/28/                    |   |  |   |         |                              | 2009   |  | A     |   | 8,500 | 8,500 <sup>(1)</sup> A          |                     | \$0.00  | 18                                    | 3,200  |   | D              |  |   |  |
|  |   | -  | Table II -  |         |                              |  |  |       |   |       | osed of,<br>onverti             |                     |   |                                       | Owned  |   |                |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)      | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemee<br>Execution I<br>if any<br>(Month/Day | Date,   | 4.<br>Transa<br>Code (<br>3) |  | of   |       | 6. Date Exercisal<br>Expiration Date<br>(Month/Day/Year |       | of Secu<br>r) Underl<br>Derivat |                     | Title and Amount<br>Securities<br>nderlying<br>erivative Security<br>nstr. 3 and 4) |                                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)    | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4)               | s<br>S<br>Illy | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>t (Instr. 4)                           |  |
|  |   |  |   |         | Code                         | v  | (A)  | (D)   | Date<br>Exercisal                                       |       | Expiration<br>Date              | Title               | 0 0   | mount<br>or<br>lumber<br>of<br>shares |  |   |                |  |   |  |
| Employee<br>Stock<br>Option<br>(right to                 | \$11.84   | 05/28/2009                                 |   |         | A                            |  | 25,500   |       | (2)   | C     | 05/29/2016                      | Com<br>Sto<br>par v | ck,<br>value 2  | 25,500                                | \$0.00   | 25,500  | 0              | D  |   |  |

## **Explanation of Responses:**

- 1. Represents restricted stock units that vest in four equal yearly installments beginning on May 28, 2010.
- 2. The option vests as to 25% of the shares underlying the grant on May 28, 2010, with the remainder of the grant vesting in three equal annual installments beginning on May 28, 2011.

## Remarks:

/s/ Ann W. Nelson

05/29/2009

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.