FORM 4

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

Washington, D.C. 20549

| TATEMENT OF | CHANGES IN | BENEFICIAL | OWNERSHIP |
|-------------|------------|------------|-----------|

OMB APPROVAL OMB Number: Estimated average burden 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

| Name and Address of Reporting Person*     Nelson Ann W   |   |  |                  |       |   | 2. Issuer Name and Ticker or Trading Symbol Employers Holdings, Inc. [ EIG ] |  |          |   |                   |                    |  |   |   | heck all a   | pplicable)<br>ector |   | Owner |
|--|---|--|------------------|-------|---|--|--|----------|---|-------------------|--------------------|--|---|---|--|---------------------|---|-------|
| (Last) (First) (Middle) 10375 PROFESSIONAL CIRCLE  |   |  |                  |       | 3. Date of Earliest Transaction (Month/Day/Year) 03/19/2016 |  |  |          |   |                   |                    |  | ^ be  | ficer (give title low) EVP, Corp. &                               | belov<br>Public Affa   | ′                   |   |       |
| (Street) RENO (City)   | NV<br>(St   |  | 89521<br>Zip)    |       | 4. If   | Ame  | endment  | , Date o | of Original   | Filed             | (Month/Da          | ay/Year  | )   |   | ne)<br><mark>X</mark> Fo   | orm filed by On     | o Filing (Check<br>e Reporting Pe<br>re than One Re | son   |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |                  |       |   |  |  |          |   |                   |                    |  |   |   |  |                     |   |       |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  |   |  |                  |       | Execution Date,   |  | 3. Transaction Code (Instr. 8) 8 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)   |          |   |                   | d Sed<br>Ber<br>Ow | mount of<br>urities<br>eficially<br>ned Following<br>orted | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |                     |   |       |
|  |   |  |                  |       |   |  |  | Code     | v   | Amount (A) or (D) |                    | Price  | Tra   | nsaction(s)<br>tr. 3 and 4)                                       |  | (111501.4)          |   |       |
| Common Stock, par value \$0.01 03/19/  |   |  |                  | /2016 | 2016  |  | F  |          | 215 D   |                   | \$28.              | 29   | 42,202  | D   |  |                     |   |       |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |                  |       |   |  |  |          |   |                   |                    |  |   |   |  |                     |   |       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any |  | Date,<br>y/Year) |       | of Disposed of (D) (Instr. 3, 4 and 5)                      |  | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |          | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares |                   | ount               | 8. Price of Derivative Security (Instr. 5)                 |   | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                     |   |       |

**Explanation of Responses:** 

Remarks:

/s/ Lenard T. Ormsby, attorney 03/22/2016 in fact

\*\* 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.