## Edgar Filing: Tway George F - Form 4

| Tway George<br>Form 4                                                                                                                                                                                                                                 | e F                                                                                   |                                                     |                                                                                         |                    |           |          |                                                                                                                    |                                                                                                                                                                                         |                                       |          |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------|-----------|----------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------|--|
| June 02, 2010                                                                                                                                                                                                                                         | 0                                                                                     |                                                     |                                                                                         |                    |           |          |                                                                                                                    |                                                                                                                                                                                         |                                       |          |  |
| FORM                                                                                                                                                                                                                                                  | 4                                                                                     |                                                     |                                                                                         |                    |           |          |                                                                                                                    |                                                                                                                                                                                         |                                       | PROVAL   |  |
|                                                                                                                                                                                                                                                       | STATES S                                                                              | SECURITIES AND EXCHANGE C<br>Washington, D.C. 20549 |                                                                                         |                    |           |          | COMMISSION                                                                                                         | OMB<br>Number:                                                                                                                                                                          | 3235-0287                             |          |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.                                                                                                                                                                                           |                                                                                       |                                                     | F CHANGES IN BENEFICIAL OWNERSH<br>SECURITIES                                           |                    |           |          |                                                                                                                    |                                                                                                                                                                                         | Expires:<br>Estimated a<br>burden hou |          |  |
| Form 4 or<br>Form 5<br>obligations<br>may continue.<br>See Instruction<br>1(b).<br>Filed pursuant to Section 16(a) of the Securities Exchances<br>Section 17(a) of the Public Utility Holding Company Act<br>30(h) of the Investment Company Act of 1 |                                                                                       |                                                     |                                                                                         |                    |           | y Act of | 1935 or Section                                                                                                    | response                                                                                                                                                                                | . 0.5                                 |          |  |
| (Print or Type R                                                                                                                                                                                                                                      | Responses)                                                                            |                                                     |                                                                                         |                    |           |          |                                                                                                                    |                                                                                                                                                                                         |                                       |          |  |
| 1. Name and Address of Reporting Person <u>*</u><br>Tway George F                                                                                                                                                                                     |                                                                                       |                                                     | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>Employers Holdings, Inc. [EIG] |                    |           |          |                                                                                                                    | 5. Relationship of Reporting Person(s) to<br>Issuer                                                                                                                                     |                                       |          |  |
| (Last)                                                                                                                                                                                                                                                | (First) (N                                                                            |                                                     | 3. Date of Earliest Transaction                                                         |                    |           |          |                                                                                                                    | (Check all applicable)                                                                                                                                                                  |                                       |          |  |
| 10375 PROFESSIONAL CIRCLE                                                                                                                                                                                                                             |                                                                                       |                                                     | (Month/Day/Year)<br>05/28/2010                                                          |                    |           |          |                                                                                                                    | Director       10% Owner         Officer (give title       Other (specify below)         SVP, President Western Region                                                                  |                                       |          |  |
| I                                                                                                                                                                                                                                                     |                                                                                       |                                                     | 4. If Amendment, Date Original<br>Filed(Month/Day/Year)                                 |                    |           |          |                                                                                                                    | <ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |                                       |          |  |
| RENO, NV                                                                                                                                                                                                                                              | 89521                                                                                 |                                                     |                                                                                         |                    |           |          |                                                                                                                    | Person                                                                                                                                                                                  | iore than One Re                      | porting  |  |
| (City)                                                                                                                                                                                                                                                | (State)                                                                               | (Zip)                                               | Table                                                                                   | e I - Non-D        | erivative | Secur    | ities Acq                                                                                                          | uired, Disposed of                                                                                                                                                                      | , or Beneficial                       | ly Owned |  |
| 1.Title of<br>Security<br>(Instr. 3)                                                                                                                                                                                                                  | rity (Month/Day/Year) Execution Date, if Trans<br>any Code<br>(Month/Day/Year) (Instr |                                                     |                                                                                         | :. 8)<br>(A)<br>or |           |          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)                                                                                                                    |                                       |          |  |
| Common                                                                                                                                                                                                                                                |                                                                                       |                                                     |                                                                                         | Code V             | Amount    | (D)      | Price                                                                                                              | (IIISU: 5 and 4)                                                                                                                                                                        |                                       |          |  |
| Stock, par<br>value \$0.01                                                                                                                                                                                                                            | 05/28/2010                                                                            |                                                     |                                                                                         | F                  | 265       | D        | \$<br>15.95                                                                                                        | 17,383                                                                                                                                                                                  | D                                     |          |  |
| Common<br>Stock, par<br>value \$0.01                                                                                                                                                                                                                  | 05/29/2010                                                                            |                                                     |                                                                                         | F                  | 265       | D        | \$<br>15.95                                                                                                        | 17,118                                                                                                                                                                                  | D                                     |          |  |

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.

1

## Edgar Filing: Tway George F - Form 4

 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) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) | ;                   | ate                | Amou<br>Unde<br>Secur | le and<br>unt of<br>rlying<br>tities<br>. 3 and 4) | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-----------------------|----------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         | Code V                                | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title                 | Amount<br>or<br>Number<br>of<br>Shares             |                                                     |                                                                             |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                        | Relationships |           |                               |       |  |  |  |  |
|--------------------------------------------------------------|---------------|-----------|-------------------------------|-------|--|--|--|--|
| FB                                                           | Director      | 10% Owner | Officer                       | Other |  |  |  |  |
| Tway George F<br>10375 PROFESSIONAL CIRCLE<br>RENO, NV 89521 |               |           | SVP, President Western Region |       |  |  |  |  |
| Signatures                                                   |               |           |                               |       |  |  |  |  |
| /s/ George F.                                                | 2010          |           |                               |       |  |  |  |  |

7s/ George F. 06/02/2010 Tway

<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.