Employers Holdings, Inc. Form 3 January 30, 2007 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005

SECURITIES

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 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Festa Stephen V			2. Date of Eve Statement (Month/Day/Y		3. Issuer Name and Ticker or Trading Symbol Employers Holdings, Inc. [EIG]					
	First)	(Middle)	01/30/2007		4. Relationship Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)		
9790 GATEWA (S RENO, NVÂ	Street)	/E			Director X Officer (give title below	all applicable) 10% (Other (specify belo O, EICN and E	ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (S	State)	(Zip)		Table I - N	on-Derivati	ive Securiti	es Be	neficially Owned		
1.Title of Security (Instr. 4)				2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	*		
No securities an	e benefic	cially own	ed	0		D	Â			
Reminder: Report of owned directly or in	-	te line for ea	ch class of secu	irities benefici	ally SI	EC 1473 (7-02)			
	Person informa require	ation conta d to respo	oond to the c lined in this f nd unless the //B control nu	orm are not e form displa						
Tabl	e II - Deri	vative Secur	rities Beneficia	lly Owned (e.	g., puts, calls,	warrants, opt	ions, c	onvertible securities)		

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Security Direct (D)		

Estimated average burden hours per

response...

0.5

Shares (I) (Instr

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
Festa Stephen V 9790 GATEWAY DRIVE RENO, NV 89521	Â	Â	Sr VP & CCO, EICN and ECIC	Â			
Signatures							
/s/ Lenard T. Ormsby, as attorney-in-fact for Stephen V. 01/30/2007 Festa							
<u>**</u> Signature of Repo	Date						
Explanation of Responses:							

* If the form is filed by more than one reporting person, *see* Instruction 5(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.