FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## 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	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Section 10. Form 4 or Form 5	

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*     Schmitzer Richard						2. Issuer Name and Ticker or Trading Symbol  James River Group Holdings, Ltd. [ JRVR ]									eck all appli Directo	tionship of Reporting Per- all applicable) Director Officer (give title			ner pecify
(Last) (First) (Middle) C/O JAMES RIVER GROUP HOLDINGS, LTD. 32 VICTORIA STREET						3. Date of Earliest Transaction (Month/Day/Year) 12/12/2014									below)	below) below) Pres. & CEO - E&S Lines Sgmt			
(Street) HAMILTON D0 HM 12  (City) (State) (Zip)					_ 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Nor	า-Deri\	/ativ	e Se	curities	s Ac	quired,	Disp	osed o	f, or E	ene	ficiall	y Owned				
				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (I		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A (D	or	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Shares 12/17						/2014			P		23,809	)(1)	A	\$21	23,809			D	
Common Shares 12.				12/1	7/2014				A		23,810	)(2)	A	\$0	47	47,619		D	
		-	Гable II -						uired, D , option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transa Code (i 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da	Date	of Sec r) Under Deriva		Title and Amount Securities Iderlying Frivative Security Istr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		xpiration ate			mount r umber f hares					
Share Option (Right to Buy)	\$21	12/12/2014			A		98,099		(3)	1	2/11/2021	Commo		8,099	\$0	98,099	9	D	

## **Explanation of Responses:**

- 1. Represents common shares purchased under the Issuer's directed share program in connection with the Issuer's initial public offering.
- 2. Grant of restricted share units (payable solely in common shares of the Issuer on each vesting date), vesting in five equal annual installments on December 17 of each of the years 2015 through 2019.
- 3. The share option vests in three equal annual installments on December 12 of each of the years 2015 through 2017.

## Remarks:

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C 1001 and 15 U.S.C. 78ff(a).

/s/ Richard Schmitzer

12/18/2014

\*\* 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.