FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 2054	19
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.5								

	tion 1(b).	iuc. occ		Filed							ities Exchang ompany Act o		f 1934		nours	s per re	esponse:	0.5
	Name and Address of Reporting Person* Roberts Patricia H				2. Issuer Name and Ticker or Trading Symbol James River Group Holdings, Ltd. [JRVR]								Relationshi Check all app	,	ng Pe	erson(s) to Is		
l	C/O JAMES RIVER GROUP HOLDINGS, LTD.			3. Date of Earliest Transaction (Month/Day/Year) 03/11/2022									Offic below	cer (give title ow)		Other (s below)	specify	
90 PITTS BAY ROAD				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) PEMBRO	OKE DO) H	IM 08	l											n filed by On n filed by Mo on		•	
(City)	(St	ate) (2	Zip)															
		Table	I - No	on-Deriva	tive S	Secu	rities	Ac	quire	d, Dis	sposed of	, or B	enefici	ally Own	ied			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.			Execution Date,		3. 4. Securities Acquired Disposed Of (D) (Instr. 8)			ed (A) or str. 3, 4 and	d 5) Secur Benef Owne	Securities Beneficially		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)	(Instr. 4)		(instr. 4)
Common	Shares			03/11/20)22				P		1,105	A	\$22.1784		10,887		D	
		Tal	ole II								osed of, convertib				d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execu (Month/Day/Year) if any		eemed ution Date, h/Day/Year)		ransaction code (Instr.)		mber rative rities ired r osed) : 3, 4	Expiration Date (Month/Day/Year		ate	Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

Remarks:

/s/ Patricia H. Roberts

03/11/2022

** Signature of Reporting Person Date

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

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.

^{*} 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).