EMC INSURANCE GROUP INC

Form 4 May 13, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number:

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response... 0.5

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person REESE MARK E			2. Issuer Name and Ticker or Trading Symbol EMC INSURANCE GROUP INC [EMCI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle) 4765 NW LOVINGTON				3. Date of Earliest Transaction (Month/Day/Year) 05/11/2016					Director 10% Owner Officer (give title Other (specify elow) Senior Vice President & CFO					
	`	(Street) MOINES, IA 50310			Filed(Month/Day/Year)					5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting				
DES MOINES, IA 30310								Pers	Person					
	(City)	State)	(Zip)	Table I - N	on-Derivat	ive Securi	ities A	cquired	l, Disposed of, or	r Beneficially	Owned			
	1.Title of Security (Instr. 3) EMCI-Common	2. Transac (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		spose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
	Stock	05/11/20)16		S	100	D	φ 27.5	18,452	D				

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

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27.5

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)			ate	7. Title Amoun Under	int of lying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security				Securities Acquired			(Instr.	3 and 4)		Owne Follo
					(A) or Disposed						Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
					4, and 3)				Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

REESE MARK E 4765 NW LOVINGTON DES MOINES, IA 50310

Senior Vice President & CFO

Signatures

MARK E. 05/13/2016 REESE

**Signature of Date
Reporting Person

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.

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