Edgar Filing: ERIE INDEMNITY CO - Form 4

ERIE INDEM	INITY CO										
Form 4											
June 02, 2016											
FORM	4	~								PPROVAL	
	UNITED	STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				GES IN I SECUR		CIA	LOW	NERSHIP OF	Expires: Estimated a burden hou response		
Form 5 obligations may contin <i>See</i> Instruct 1(b).	s Section 17(a	a) of the		ility Hold	ing Com	ipany	Act of	e Act of 1934, f 1935 or Sectio 40			
(Print or Type Ro	esponses)										
1. Name and Ac Smith Dougl	ldress of Reporting as Edward	Person <u>*</u>	Symbol	Name and			0	5. Relationship of Issuer			
(Last)	(First) (M	/liddle)	3. Date of	Earliest Tra	ansaction			(Chec	k all applicable	e)	
			(Month/Day/Year) 06/01/2016					Director 10% Owner X Officer (give title Other (specify below) Senior Vice President 6. Individual or Joint/Group Filing(Check Applicable Line)			
				endment, Date Original onth/Day/Year)							
ERIE, PA 16	530							_X_ Form filed by 0 Form filed by N Person	One Reporting Pe More than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Execution any	med	3. Transactio Code (Instr. 8)	4. Securit on(A) or Di (D)	ties Ad spose 4 and (A) or	cquired 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	
Class A Common Stock	06/01/2016			J <u>(1)</u>	0.639	А	\$ 97.9	3,217.484	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Amount of	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr	
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Edgar Filing: ERIE INDEMNITY CO - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Smith Douglas Edward 100 ERIE INSURANCE PLACE ERIE, PA 16530			Senior Vice President					
Signatures								
Chandra M. Burns, Power of Attorney		06/02/2016						
**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).
- (1) Participant directed transaction under 401(k) Plan

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.