EMC INSURANCE GROUP INC

Form 4

August 26, 2013

FORM 4

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

OMB

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **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

may continue. See Instruction

1(b).

Form 5

obligations

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading SIMONETTA LISA ANNE Issuer Symbol EMC INSURANCE GROUP INC (Check all applicable) [EMCI] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Officer (give title __X_ Other (specify (Month/Day/Year) below) below) 20 SW 58TH DRIVE 08/22/2013 VICE PRES., EMCC-PARENT CO. (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

DES MOINES, X1 50312

(City) (Sta	ate) (Zip)	Table I - Non	-Derivativ	e Securitio	es Acq	uired, Dis _l	posed of, or Ben	eficially Own	ned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	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)
EMCI-COMMON STOCK	08/22/2013		M	3,200	A	\$ 18.865	4,952	D	
EMCI-COMMON STOCK	08/22/2013		F	2,488	D	\$ 29.16	2,464	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Person

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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. Transaction Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisabl Date (Month/Day/Year)	•	7. Title and A Underlying So (Instr. 3 and 4
						Date Exercisable	Expiration Date	Title

Code V (A)

M

Reporting Owners

\$ 18.865

Reporting Owner Name / Address Relationships

08/22/2013

Director 10% Owner Officer Other

SIMONETTA LISA ANNE 20 SW 58TH DRIVE DES MOINES, X1 50312

VICE PRES., EMCC-PARENT CO.

(D)

 $3,200 \quad 03/03/2010^{\underline{(1)}} \quad 03/03/2019^{\underline{(1)}}$

COMMON

STOCK

Signatures

NQO-RIGHT

TO BUY

LISA A.

SIMONETTA 08/26/2013

**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) OPTIONS VEST IN FIVE EQUAL ANNUAL INSTALLMENTS BEGINNING ONE YEAR AFTER DATE OF GRANT.

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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