RLI CORP Form 4 November 19, 2014

FORM 4 LINITED STATE

1. Name and Address of Reporting Person *

MICHAEL JONATHAN E

OMB APPROVAL

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

OMB Number: 3235-0287 January 31,

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: 2005
Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

Symbol

See Instruction 1(b).

(Print or Type Responses)

Stock

			RLI CORP [RLI]						(Check all applicable)			
(Last) 9025 N. LI	(First) NDBERGH DRI	(Middle) VE	3. Date of (Month/I) 11/17/2	Day/Yea		ransaction			_X_ Director _X_ Officer (gives)	% Owner ther (specify		
PEORIA, I	(Street) L 61615		4. If Ame			ate Originar)	al		6. Individual or J Applicable Line) _X_ Form filed by Form filed by Person		Person	
(City)	(State)	(Zip)	Tab	le I - N	on-l	Derivative	Secu	rities A	cquired, Disposed o	of, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr.	8)	4. Securitor(A) or Di (D) (Instr. 3,	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)	
Common Stock	11/17/2014			J(1)		40.9	A	\$ 48.9	477,725.1158	D (2)		
Common Stock									197,543.1873	I	By Empl. Stock Ownership Plan (3)	
Common Stock									106,989.524	I (2)	By Key Employee Benefit Plan	
Common Stock									43,178.1482	I (2)	By Trust	

Common Stock	8,305.9199	I (2)	J.E. Michael 2012 Grantor Retained Annuity Trust Dtd 07/24/12
Common Stock	23,188	I	J.E. Michael 2014 GRAT 1 dtd 08/06/14
Common Stock	23,188	I	J.E. Michael 2014 GRAT 2 dtd 08/06/14

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	le and	8. Price of	1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	ınt of	Derivative]
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Ī
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired						
					(A) or						1
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
							Expiration Date	Title	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
	X		President				

Reporting Owners 2

MICHAEL JONATHAN E 9025 N. LINDBERGH DRIVE PEORIA, IL 61615

Signatures

/s/ Jonathan E. 11/19/2014 Michael

**Signature of Reporting Date
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).
- (1) Shares purchased through payroll deduction feature of the RLI Dividend Reinvestment Plan.
- (2) Ownership reflects dividend reinvestment
- (3) Balance reflects annual company contributions and dividend reinvestment.

Remarks:

Historically, each outstanding stock option grant has been reflected under Table II on all Form 4 filings. Those previously reportant 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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