FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	$D \subset$	205/10
wasiiiigton,	D.C.	20549

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washington, D.C. 20549
ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL							
OMB Number:	3235-036						

Estimated average burden

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Form 3	Holdings Repo		OWNERSHIP									hou	hours per response:		1.0		
_	Transactions F		File	ed pursuant to or Section					ities Excha ompany A								
1. Name and Address of Reporting Person* <u>Howell Robin Robinson</u>				2. Issuer Name and Ticker or Trading Symbol ATLANTIC AMERICAN CORP [AAME]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 4370 PEA	(Fir	st) (Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015 Officer (give title below) Other (specify below)													
(Street) ATLANT	ʿA GA	A 3	30319	4. If Amen	Line) X Forr							Form	al or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta		Zip)														
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, or	Benefic	cially	Owne	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)				Securitie: Beneficia		es ally	6. Ownership Form: Direct	rship Inc Direct Be	7. Nature of Indirect Beneficial	
								Amoun	t	(A) or (D)	Price	!	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)
Common	Stock												16,0	025]	D	
Common	Stock												38,0	00(1)		I Fo	ustodian or hildren
Common	Stock												3,953,	256 ⁽²⁾			rust eneficiary
Common	Stock												1 2.1/5 1 1 1		y IRA ccount		
Common	Stock												705,676 ⁽³⁾ I By 5		y Spouse		
Common	Stock												168,200 ⁽⁴⁾				rust F/B/O hildren
Common	Stock											190,356 ⁽⁵⁾				rust F/B/O hildren	
		Та	able II - Derivat (e.g., p	tive Secur uts, calls,									wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		mber vative rities iired r osed)	6. Da	ate Exercisable and ration Date th/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. Mrs. Howell disclaims beneficial ownership of all such shares.
- 2. Beneficiary under trust holding shares for her benefit and over which her mother, Harriett J. Robinson, is trustee.
- 3. Mrs. Howell has an indirect interest in the following shares of Common Stock owned by her husband, Hilton H. Howell, Jr.: 491,954 shares owned directly and 213,722 shares owned through his 401(k) plan. Mrs. Howell disclaims beneficial ownership of all such shares.
- 4. Shares held in a trust for the benefit of Mrs. Howell's children and over which her mother serves as trustee. Mrs. Howell disclaims beneficial ownership of all such shares.
- 5. Shares held in a trust for the benefit of Mrs. Howell's children and over which her mother serves as trustee. Mrs. Howell disclaims beneficial ownership of all such shares.

Remarks:

Robin R. Howell

02/12/2016

** Signature of Reporting Person

Date

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

- * 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.

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.