FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
| | | |

| Check this box if no longer subject to | STATEMENT OF CHANGES IN BENEFICIAL (| OWNERSHIP |
|--|--------------------------------------|-----------|
| Section 16. Form 4 or Form 5 | | |
| obligations may continue Coo | | |

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>RIDDLE D RAYMOND</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol ATLANTIC AMERICAN CORP [AAME] | | | | | | | | (Ch | Relationshi eck all app X Direc | olicable) | , | Person(s) to Issuer 10% Owner | | |
|--|---|--|---|-------------|---|---|--------|--------|------------------------------------|--------|--|---|--------------------------------|--|--|---|---|--|--|
| (Last) 4370 PE | ` | rst) (ROAD, N.E. | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/26/2005 | | | | | | | | | | er (give title w) | Other (specify below) | | |
| (Street) ATLANT | | | 30319-30 (Zip) |)54 | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Line | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - No | n-Deriv | ative | Sec | curiti | es Acc | quired | , Dis | posed o | f, or E | Bene | ficial | ly Own | ed | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | r) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | | 5) Secur Benef | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | ount (A) or (D) | | rice | Trans | action(s) 3 and 4) | | (Instr. 4) | |
| Common Stock | | | | 04/26/2005 | | | | | M | | 1,000 | A | \$ | 2.687 | 75 1 | 19,983 | D | | |
| Common | Common Stock | | | 04/26/2005 | | | | | S | | 882 | Ι |) | \$3.05 | 5 1 | 19,101 | D | | |
| Common | Stock | | | | | | | | | | | | | | 600 ⁽¹⁾ I | | | By Spouse | |
| | | Ta | | | | | | | | | osed of, o | | | | Owned | | , | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/D | Date, Trans | | | of | | 6. Date E Expiratio (Month/I | on Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4) | | S (I | s. Price of Derivative Security Instr. 5) | 9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |
| Option to | \$2.6875 | 04/26/2005 | | T | M | | | 1,000 | 11/02/20 | 000 | 05/02/2005 | Cmn | 2,0 | 00 | (2) | 2,000 ⁽²⁾ | D | | |

Explanation of Responses:

- 1. Mr. Riddle also has an indirect ownership interest in 600 shares owned by his spouse, for which Mr. Riddle expressly disclaims beneficial ownership of such securities.
- 2. Mr. Riddle also holds options to acquire 2000 shares of common stock granted under the Company's 1996 Non-Employee Director Stock Option Plan at exercise prices ranging from \$1.90 to \$2.68.

Remarks:

Janie L Ryan, POA

04/26/2005

** 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.