## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
bligations may continue. See
netruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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>HOWELL HILTON H JR</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) (First) (Middle) 4370 PEACHTREE ROAD, N.E.						3. Date of Earliest Transaction (Month/Day/Year) 05/06/2016									X Officer (give title Other (specibelow)  Chairman, President & CEO			<i>ı</i> )` ′	
(Street) ATLANTA GA 30319					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting				
(City)	(State) (Zip)														Person				
			e I - Nor			_				Dis									
1. Title of Security (Instr. 3)  2. Transac Date (Month/D:						ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						5. Amount of 4 and Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	Trans	saction(s) . 3 and 4)		(11150: 4)	
Common Stock 0					05/06/2016				F		26,680	0	D	\$4.11 4		175,274	D		
Common Stock														2:	21,681(1)	I	By 401(k) Plan		
Common Stock														6	3,100 <sup>(2)</sup>	I	By Spouse		
Common Stock															1	58,200 <sup>(3)</sup>	I	Trust F/B/O Children	
Common Stock														190,356(4)		I	Trust F/B/O Children		
		Та	ıble II - I								sed of, onvertib				y Owned	d	,		
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3A. Deeme Execution if any (Month/Day			Date,	Code (Inst		n of E		Expiratio	6. Date Exercisa Expiration Date (Month/Day/Yea		Amo Seci Und Deri Seci	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of						

## **Explanation of Responses:**

- 1. Based on most recent plan statement.
- 2. Mr. Howell has an indirect interest in the following shares owned directly or indirectly by his spouse, Robin R. Howell: 22,925 shares owned directly; 2,175 shares owned in an IRA account and 38,000 shares held indirectly by her as custodian for their children. Mr. Howell disclaims beneficial ownership of all such shares.
- 3. Shares held in a trust for the benefit of Mr. Howell's children and over which Mr. Howell's mother-in-law serves as trustee. Mr. Howell disclaims beneficial ownership of all such shares.
- 4. Shares held in a trust for the benefit of Mr. Howell's children and over which Mr. Howell's mother-in-law serves as trustee. Mr. Howell disclaims beneficial ownership of all such shares.

05/10/2016 Hilton H. Howell, Jr. \*\* 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.