## Edgar Filing: RLI CORP - Form 4

RLI CORP Form 4 November 12	2 2009											
FORM	Л									OMB A	APPROVAL	
	UNITED	STATES				AND EX 1, D.C. 2			COMMISSION	OMB Number:	3235-0287	
Check the if no long				_	-					Expires:	January 31, 2005	
subject to Section 1 Form 4 o Form 5	6. r	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								ed average nours per		
obligation may cont <i>See</i> Instru 1(b).	ns inue. Section 170	(a) of the	Public U	Utility	Ho		mpar	ny Act c	of 1935 or Section	n		
(Print or Type F	Responses)											
1. Name and A STONE MI	address of Reporting CHAEL J	Person <u>*</u>	2. Issu Symbol RLI C			<b>d</b> Ticker o	or Trad	ling	5. Relationship of Issuer	Reporting Pe	erson(s) to	
(Last)	(First) (	Middle)		-		-	<b>1</b>		(Check	k all applicab	le)	
· · ·	NDBERGH DRI		3. Date of Earliest Transaction (Month/Day/Year) 11/10/2009					Director 10% Owner Officer (give titleX Other (specify below) President RLI Insurance Compan				
PEORIA, IL	(Street)		4. If An Filed(M			Date Origin ar)	nal		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	One Reporting I	Person	
(City)	(State)	(Zip)	Tal	ble I - N	Non-	Derivativ	e Secu	rities Ac	Person quired, Disposed of	, or Beneficia	ally Owned	
	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	ed Date, if	3. Transa Code (Instr.	actic 8)	4. Securi n(A) or D (Instr. 3, Amount	ties Adispose 4 and (A) or	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	11/10/2009			G	V	400	D	\$ 51.23	105,216.0464	D <u>(1)</u>		
Common Stock									14,640.4787	I	By Empl. Stock Ownership Plan (2)	
Common Stock									18,011.2686	Ι	By Trust (1)	
Common Stock									5,079.0444	Ι	M. J. Stone Grantor Retained	

								Annuity Trust		
Reminder: F	Report on a ser	parate line for each cla	ass of securities benef	Person inform require	ns who re ation con ed to resp ys a curre	or indirectly. spond to the co tained in this fo ond unless the ently valid OMB	rm are not form	SEC 1474 (9-02)		
			ative Securities Acq puts, calls, warrants				ned			
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. Transactie Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and A Underlying S (Instr. 3 and	Securities	8. De Se (Ir
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 35.08					05/06/2005	05/06/2014	Common Stock	40,000	
Stock Option	\$ 44.54					05/05/2006(3)	05/05/2015	Common Stock	30,000	
Stock Option	\$ 50.15					05/04/2007(3)	05/04/2016	Common Stock	27,500	
Stock Option	\$ 56.09					05/03/2008(3)	05/03/2017	Common Stock	31,500	
Stock Option	\$ 50					05/01/2009(3)	05/01/2018	Common Stock	34,000	
Stock Option	\$ 46.9					05/07/2010 <u>(3)</u>	05/07/2017	Common Stock	32,000	

## **Reporting Owners**

Reporting Owner Name / Address			Relationships		
	Director	10% Owner	Officer	Other	
STONE MICHAEL J 9025 N. LINDBERGH DRIVE PEORIA, IL 61615				President RLI	

Insurance Compan

## Signatures

/s/ Michael J. Stone

11/11/2009

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) Ownership reflects dividend reinvestment.
- (2) Ownership reflects shares allocated to ESOP participant's account and dividend reinvestment.
- (3) Pursuant to option schedule wherein 20% of the aggregate number of shares granted may be exercised commencing one year from grant date and each year thereafter in 20% increments.

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.