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RLI CORP											
Form 4											
August 04,	2008										
FORM	M 4					~~~	NGE G		OMB AF	PROVAL	
	UNITED	STATES			AND EX n, D.C. 20		NGE CO	OMMISSION	OMB Number:	3235-0287	
if no lo	this box								Expires:	January 31, 2005	
subject to Section 16. Form 4 or Statement of CHANGES IN BENEFICIAL OWNERS SECURITIES					ERSHIP OF	Estimated average burden hours per response 0.					
Form 5 obligati may co <i>See</i> Inst 1(b).	ions Section 17	(a) of the l	Public I	Utility Ho		npan	y Act of	Act of 1934, 1935 or Section)			
(Print or Type	e Responses)										
1. Name and Address of Reporting Person <u>*</u> Kliethermes Craig W			2. Issuer Name and Ticker or Trading Symbol RLI CORP [RLI]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check all applicable)			
((Month/Day/Year) 08/01/2008				Director 10% Owner Officer (give title X Other (specify below) VP, Actuarial RLI Insurance Co			
				Amendment, Date Original d(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			
								Person			
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. 4. Securities Acquired (TransactionDisposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Pr			r 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				Coat y Amount (D)			11100	2,479.628 (1)	D		
Common Stock								1,024.4459 (2)	Ι	By ESOP	
Common Stock	08/01/2008			J <u>(3)</u>	26.2393	A	\$ 54.5297	1,694.1741 7 (1)	Ι	By Executive Deferred Comp	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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required to respond unless the form displays a currently valid OMB control number.

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

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. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securitie: Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 50					05/01/2009	05/01/2018	Common Stock	11,000	
Stock Option	\$ 50.15					05/04/2007	05/04/2016	Common Stock	5,000	
Stock Option	\$ 56.09					05/03/2008	05/03/2017	Common Stock	9,000	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Kliethermes Craig W 9025 N. LINDBERGH DRIVE PEORIA, IL 61615				VP, Actuarial RLI Insurance Co		

Signatures

CraigWKliethermes 08/04/2008

**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).
- (2) Ownership reflects shares allocated to ESOP participant's account and dividend reinvestment.

(1) Ownership reflects dividend reinvestment.

(4)

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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.

(3) The securities herein were allocated to my account pursuant to the RLI Corp. Executive Deferred Compensation Agreement.

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.