MERCURY GENERAL CORP

Form 4/A

December 05, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB

Check this box if no longer subject to

Washington, D.C. 20549

3235-0287 Number: January 31, Expires:

2005

OMB APPROVAL

Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per 0.5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * TIRADOR GABRIEL	2. Issuer Name and Ticker or Trading Symbol MERCURY GENERAL CORP [MCY]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (First) (Middle) 1700 GREENBRIAR LANE	3. Date of Earliest Transaction (Month/Day/Year) 12/03/2014	_X_ Director 10% OwnerX_ Officer (give title _X_ Other (specify below) President / Director		
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year) 12/05/2014	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
BREA, CA 92821		Form filed by More than One Reporting Person		

BREA, CA	. 92821		Form filed by More than One Reporting Person						
(City)	(State)	(Zip) Tab	le I - Non-l	Derivative Securities Acqui	red, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired (A)	5. Amount of	6.	7. Nature o		
Security	(Month/Day/Year)	Execution Date, if	Transactio	omr Disposed of (D)	Securities	Ownership	Indirect		
(Instr. 3)		any	Code	(Instr. 3, 4 and 5)	Beneficially	Form:	Beneficial		
		(Month/Day/Year)	(Instr. 8)		Owned	Direct (D)	Ownership		

Becarity	(month buj rour)	Encourion Dute, ii	Transactio	ibi Dispos	ca or (, -)	becarries	Ownership	mancet
(Instr. 3)		any	Code	(Instr. 3, 4	4 and 5	5)	Beneficially	Form:	Beneficial
		(Month/Day/Year)	(Instr. 8) Code V	Amount	(A) or (D)	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock							1,344	I	ESOP Plan
Common Stock	12/03/2014		M	10,145	A	\$ 42.458	41,967	D	
Common Stock	12/03/2014		F	8,905	D	\$ 56.19	33,062	D	

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

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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. Transaction Code (Instr. 8)	5. Number of actionDerivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Derivative Expiration Date (Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock	\$ 33.6091	11/27/2013		M		8,925	05/01/2010	05/01/2019	Common Stock	8,925
Common Stock (1)	\$ 42.458	12/03/2014		M		10,145	04/26/2014	04/26/2023	Common Stock	50,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
TIRADOR GABRIEL 1700 GREENBRIAR LANE BREA, CA 92821	X		President	Director				

Signatures

Judy Walters, Attorney-In-Fact for Gabriel
Tirador

12/05/2014

**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) Options granted on 04/26/2013 with 25% vesting per year for four years

Remarks:

Date of earliest transaction should have been 12/3/2014. Form shows wrong date of 12/3/2013

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.

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