

UNITED FIRE GROUP INC  
Form 4  
February 05, 2014

**FORM 4** UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2015  
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
SCHARMER NEAL R

2. Issuer Name and Ticker or Trading Symbol  
UNITED FIRE GROUP INC  
[UFCS]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
118 SECOND AVENUE SE, P.O.  
BOX 73909

3. Date of Earliest Transaction  
(Month/Day/Year)  
01/15/2014

\_\_\_\_ Director  
 Officer (give title below)  
\_\_\_\_ 10% Owner  
\_\_\_\_ Other (specify below)  
VP/General Counsel/Corp Sec

(Street)  
CEDAR RAPIDS, IA 52407-3909

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)			
			Code	V	Amount	(A) or (D)	Price			
Common Stock	01/15/2014	01/17/2014 <sup>(1)</sup>	P <sup>(2)</sup>	V <sup>(3)</sup>	6 <sup>(4)</sup>	A	\$ 27.83 <sup>(5)</sup>	780 <sup>(6)</sup>	I	By 401(k) Plan for Self
Common Stock	01/31/2014	02/03/2014 <sup>(1)</sup>	P <sup>(2)</sup>	V <sup>(3)</sup>	7 <sup>(4)</sup>	A	\$ 25.1 <sup>(5)</sup>	788 <sup>(6)</sup>	I	By 401(k) Plan for Self
Common Stock								829	I	By Issuer's Employee Stock Ownership Plan for

Common Stock self  
 6,620 <sup>(7)</sup> D

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

**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 control number.** SEC 1474 (9-02)

**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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 6)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
SCHARMER NEAL R 118 SECOND AVENUE SE P.O. BOX 73909 CEDAR RAPIDS, IA 52407-3909			VP/General Counsel/Corp Sec	

## Signatures

/s/ Neal R. Scharmer by Dianne M. Lyons, Attorney-in-Fact 02/05/2014

\*\*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) The deemed execution date of this transaction is the settlement date as provided by the Issuer's 401(k) Plan trustee/administrator.
- (2) Shares acquired through routine payroll deduction and participation in the Issuer's 401(k) Plan.

## Edgar Filing: UNITED FIRE GROUP INC - Form 4

- (3) This transaction qualifies as a non-discretionary transaction from a tax-qualified plan and is voluntarily reported on Form 4.
- (4) Represents the approximate number of shares (excluding fractionals) acquired by the trustee/administrator of the Issuer's 401(k) Plan for the Reporting Person's benefit, based on a statement of the 401(k) Plan trustee/administrator.
- (5) The price per share is based on a statement provided by the Issuer's 401(k) Plan trustee/administrator.

- The number of securities shown as being held in, acquired by or disposed of by the Issuer's 401(k) account for the Reporting Person's benefit are the approximate number of shares of common stock (excluding fractionals) for which the Reporting Person has the right to
- (6) direct the vote under the Issuer's 401(k) plan. Such shares are not directly allocated to 401(k) plan participants, but are instead held in a unitized fund consisting primarily of Issuer common stock, together with a small percentage of short-term investments. 401(k) Plan participants acquire units of this fund.

- The total number of securities beneficially held directly by the Reporting Person following the reported transaction includes: 3,200 shares held by Mr. Scharmer; 1,974 shares of restricted stock issued under the Issuer's 2008 Stock Plan which vest, subject to certain conditions, on 02/18/2016; and 1,446 shares of restricted stock issued under the Issuer's 2008 Stock Plan which vest, subject to certain conditions, on 02/15/2018.
- (7)

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.