FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

\	D 0	20540
Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
haura par raananaa:	0.5							

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Novacek Jorie L				2. Issuer Name and Ticker or Trading Symbol ERIE INDEMNITY CO [ERIE]								ck all application	10% C		10% Ow	ner		
(Last) 100 ERIE II	(First	,	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/15/2024								below)	give title SVP, Co	ontrol	Other (sp below)	ecity	
(Street) ERIE	PA	16	5530		4. If Amendment, Date of Original Filed (Month/Day/Year)						Line) 【 Form fil	Form filed by More than One Reporting					
(City)	(State	e) (Zi	p)		Rul	Rule 10b5-1(c) Transaction Indication												
	Check this box to indicate that a transaction was made pursuant to a the affirmative defense conditions of Rule 10b5-1(c). See Instruction																	
		Table	e I - Nor	-Deriv	ative	Secu	urities	Acq	uired, D	isp	osed of	, or Ben	eficially	/ Owned				
1. Title of Security (Instr. 3) 2. Transc Date (Month/D				Exec Day/Year) if an		A. Deemed xecution Date, any Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3,			Beneficia Owned F	s Form Illy (D) or ollowing (I) (In	Form:	n: Direct II or Indirect E nstr. 4) C	7. Nature of ndirect Beneficial Dwnership			
								Code V		Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ction(s)			nstr. 4)	
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)	ative Conversion or Exercise (Month/Day/Year) Execution Date, if any		Date,	Transaction of Code (Instr. 8) Sect Acqu (A) o Disp of (D		of Derivati Securiti Acquire (A) or Dispose of (D) (II	of Expi Derivative (Mor Securities Acquired		Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares					
Incentive Compensation Deferral Plan Share Credits	(1)	03/15/2024			J ⁽²⁾		192.05		(3)		(3)	Class A Common Stock	192.05	\$416.79	443.64	14	D	

- 1. Conversion price is not applicable to shares granted under the Erie Indemnity Company Incentive Compensation Deferral Plan.
- $2.\ Acquired\ under\ the\ Erie\ Indemnity\ Company\ Incentive\ Compensation\ Deferral\ Plan\ from\ an\ Annual\ Incentive\ Plan\ award.$
- 3. The shares subject to this reporting are Share Credits which are periodically credited to the accounts of a select group of management and highly compensated employees of Erie Indemnity Company pursuant to its Incentive Compensation Deferral Plan. ??These Share Credits represent the right to receive an equivalent number of shares of Erie Indemnity Company Class A common stock when the reporting individual retires or otherwise separates from service with the Company.? There are no exercisable or expiration dates for these securities.

Rebecca A. Buona, Power of 03/19/2024 <u>Attorney</u>

** 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.