FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nachington	$D \subset$	20540	
Vashington,	D.C.	20549	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Instruction	1 1(b).	. 000		Fil					(a) of the Sec e Investment					34		liours	perres	porise.	0.5	
Name and Address of Reporting Person* Feltz Lorianne					2. Issuer Name and Ticker or Trading Symbol ERIE INDEMNITY CO [ERIE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) 100 ERIE I	(Last) (First) (Middle) 100 ERIE INSURANCE PLACE					3. Date of Earliest Transaction (Month/Day/Year) 04/30/2024								X	below)	Officer (give title below) Executive Vio		Other (specification) ce President		
(Street) ERIE PA 16530					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)	<i>'</i>					
(City)	(Stat	e) (Z	ip)			Check	this box	x to ind	Transa	ansac	tion was n	nade purs	uant		instruction or	written pla	ın that is	s intended to	satisfy	
			le I - Noi			_			cquired, [Disp					_					
1. Title of Security (Instr. 3) 2. Trans Date (Month/			/Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		d (A) or r. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	t (A) or (D)		Price	Transaction (Instr. 3 ar	on(s)				
Class A Cor	mmon Stock	ζ.		04/3	0/2024	4			J ⁽¹⁾		4.45	51	A	\$382.66 4,956.255 D				D		
		T							quired, Di s, options						wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou Securities Under Derivative Securi (Instr. 3 and 4)		nderlying ecurity	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	re es ally g d ion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v ((A)	(D)	Date Exercisable		opiration ate	Title	N	Amount or Number of Shares						
Incentive Compensation	\$0 ⁽²⁾								(3)		(3)	Class A		2.671.855		2,671.	855	D		

Explanation of Responses:

Deferral Plan Share Credits

1. Participant directed transaction under 401(k) Plan

- 2. Conversion price is not applicable to shares granted under the Erie Indemnity Company Incentive Compensation Deferral Plan.
- 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

05/01/2024

<u>Attorney</u>

Stock

** 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.