FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Vashington,	D.C. 2	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-									
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)

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

1. Name and Address of Reporting Person* <u>LUCORE GEORGE R</u>					2. Issuer Name and Ticker or Trading Symbol ERIE INDEMNITY CO [ERIE] 3. Date of Earliest Transaction (Month/Day/Year)								(Che	5. Relationship of Reporting Per (Check all applicable) X Director Officer (give title			10% Ov Other (s	vner	
(Last)	(First)	•	ddle)		01/31/2024									below)			below)		
220 FIELDSTONE WAY					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X Form filed by One Reporting Person					
ERIE	PA	16	505										Form filed by More than One Reporting Person						
(City) (State) (Zip)					Rul	Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	l - Nor	n-Deriv	ative	Secu	ırities	Acc	uired,	Disp	osed of	f, or Ben	eficially	y Owned					
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I				2A. Deeme Execution I if any (Month/Day		Date,	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amour Securities Beneficia Owned F	s Form Illy (D) o ollowing (I) (In		m: Direct I or Indirect E nstr. 4) (7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)	
Class A Common Stock														1,725			D		
	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 Execution (Month/Day/Year) if any (Month/Day		n Date, Transacti Code (Ins					6. Date Exercisable and 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)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Directors' Deferred Compensation Share Credits	\$0 ⁽¹⁾	01/31/2024			J ⁽²⁾		74.49		(3)		(3)	Class A Common Stock	74.49	\$345.83	3,618.2	66	D		

Explanation of Responses:

- 1. Conversion price is not applicable to shares granted under the Outside Directors' Deferred Compensation Plan.
- 2. Acquired under Directors' Deferred Compensation Plan.
- 3. The shares subject to this reporting are Share Credits which are periodically credited to the accounts of certain Directors of Erie Indemnity Company pursuant to its Outside Directors' Stock 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's service as a Director of the Company ends. There are no exercisable or expiration dates for these securities.

Rebecca A. Buona, Power of 02/01/2024 <u>Attorney</u>

** Signature of Reporting Person

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.