SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

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

Stacke James H. (f	. Date of Event equiring Stater Month/Day/Yea 2/11/2018	ment	3. Issuer Name and Ticker or Trading Symbol <u>Federal Life Group, Inc.</u> [FLF]					
(Last) (First) (Middle) 3750 WEST DEERFIELD ROAD			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner		(Month/Day/Year)			
			Officer (give title below)			6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street)				50.011)		X Form filed by One Reporting Person		
RIVERWOODS IL 60015						Form filed by Reporting P	y More than One erson	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock			5,000	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securi		4. Conversio or Exercis Price of		6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Derivative Security	or Indirect (I) (Instr. 5)		
Stock options	12/10/2019 ⁽¹⁾	12/10/2028	³ Common stock	11,667	10	D		

Explanation of Responses:

1. Options vest 25% per year commencing December 10, 2019.

/s/ James H. Stacke

12/11/2018

** Signature of Reporting Person

Date

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

 \ast If the form is filed by more than one reporting person, see Instruction 5 (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.