PROASSURANCE CORP

Form 4 March 02, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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subject to Section 16. Form 4 or Form 5 obligations may continue.

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if no longer

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 See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

(Last) C/O PROACORPORA	Address of Reporting arryl Keith (First) ASSURANCE ATION, 100 OOD PLACE	Symb PRO (Middle) 3. Dai (Mon	ossuer Name and Ticker or Trading pollocal DASSURANCE CORP [[PRA]] atte of Earliest Transaction ath/Day/Year) 01/2007	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title X Other (specify below) Senior Vice-President / Co-President of Subsidiary			
	(Street)		Amendment, Date Original (Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)			
BIRMINGHAM, AL 35209-6811 _X_ Form filed by One Reporting Porting Por							
(City)	(State)	(Zip)	Гable I - Non-Derivative Securities A	equired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year	Code (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	5. Amount of Securities Ownership Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4)			
Stock	03/01/2007		P $117 \frac{(1)}{2}$ A 51.18	41,628 D			
Common Stock				ProAssurance Group 1,320 I Savings and Retirement Plan [401(k)]			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.							

SEC 1474 Persons who respond to the collection of information contained in this form are not (9-02)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and A Underlying S (Instr. 3 and	Securities 1
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 51.38					09/11/2006(2)	09/11/2016	Common Stock	12,500
Employee Stock Option (Right to Buy)	\$ 41.15					09/10/2005(3)	09/10/2015	Common Stock	5,000
Employee Stock Option (Right to Buy)	\$ 33.28					09/10/2004(4)	09/10/2014	Common Stock	7,500
Employee Stock Option (Right to Buy)	\$ 22					09/04/2003(5)	09/03/2013	Common Stock	10,000

Reporting Owners

Reporting Owner Name / Address	Ketationships				
	Director	10% Owner	Officer	Other	
Thomas Darryl Keith			Senior Vice-President	Co-President of	
C/O PROASSURANCE CORPORATION				Subsidiary	
100 BROOKWOOD PLACE					

Reporting Owners 2

Deletionships

BIRMINGHAM, AL 35209-6811

Signatures

Darryl K. 03/02/2007 Thomas

**Signature of Date
Reporting Person

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) Shares acquired in the amended and restated ProAssurance Stock Ownership Plan. Purchases under this plan are exempt under Rule 16b-3(c)
- (2) The options vest in five equal, yearly installments commencing on September 11, 2006
- (3) The options vest in five equal, yearly installments commencing on September 10, 2005
- (4) The options vest in five equal, yearly installments commencing on September 10, 2004
- (5) The options vest in five equal, yearly installments commencing on September 4, 2003

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.

Signatures 3