FORM 5

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	205.40
Nashington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL								
OMB Number:	3235-0362							
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1.0

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Form 3 Holdings Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Form 4 Transactions Reported.		or Section 30(h) of the Inves	stment Company	Act of 19	40				
1. Name and Address of Reporting Person HOWELL HILTON H JR	k			r Trading Symbol N INC [GT				elationship of Repor ck all applicable) Director		to Issuer 0% Owner
(Last) (First) 4370 PEACHTREE ROAD,NE	(Middle)	3. Statement for 12/31/2012	or Issuer's Fisc	cal Year Ended (N	/lonth/Day	y/Year)	X	Delow)		ther (specify elow)
	30319 (Zip)	4. If Amendmen	nt, Date of Ori	ginal Filed (Montl	h/Day/Yea	ar)	6. Inc Line)		One Reporting	Person
	le I - Non-Deri	vative Securit	ies Acquir	ed Disnose	d of o	Renefic	rially	v Owned		
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Dispos				5. Amount of Securities Beneficially	6. Ownership Form: Direct	7. Nature of Indirect Beneficial
				Amount	(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	(D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock								676	I	By 401(k) plan
Class A Common Stock								58,575	I	Spouse
Class A Common Stock								500	I	Children
Common Stock								35,000	I	Delta Fire & Casualty Insurance Co.
Class A Common Stock								33,750	I	Delta Fire & Casualty Insurance Co.
Common Stock								10,000	I	Delta Life Insurance Co.
Class A Common Stock								135,795	I	Delta Life Insurance Co.
Class A Common Stock								221,706	I	Bankers Fidelity Life Insurance Co.
Common Stock								56,000	I	Atlantic American Corporation
Class A Common Stock								166,354	I	Atlantic American Corporation
Common Stock								50,000	I	American Southern Insurance Co.
Class A Common Stock								69,370	D	
Common Stock								482,323	D	
Common Stock								18,724	I	Spouse
Common Stock	12/30/2012		G	640,400	A	\$0.0	0	640,400	I	Trust F/B/O Children

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any		Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially		Ownership Form: Direct		7. Nature of Indirect Beneficial		
		(Month/Day/Year)		ear)			Amount (A		(A) or (D)	Price	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)	
Class A C	Common Sto	ck	12/30/2012			G		563	,900	A	\$0.00	563,900				Trust F/B/O Children
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)	Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rative rities ired r osed)	Expir	ate Exercisable and iration Date nth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)
					(A)	(D)	Date	risahle	Expiration	ı Title	Amount or Number of Shares					

Explanation of Responses:

Remarks:

/s/ Dottie Boudreau by Power of Attorney

02/14/2013

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).