## Edgar Filing: TORCHMARK CORP - Form 4

TORCHMA	RK CORP										
Form 4											
January 04, 2	2008										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									APPROVAL		
	STATES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					N OMB Number:	3235-0287			
Check this box								Expires:	January 31		
subject to statement of CHANGES IN BENEFICIAL OWNERS					WNERSHIP OI	Estimated average					
Section 1		SECURITIES					burden ho				
Form 4 o								response	response 0.		
Form 5 obligation	nc *						ange Act of 1934.				
may cont				•	<b>.</b>	<b>.</b> .	t of 1935 or Section	ion			
See Instru	uction	30(h)	of the In	vestment	Company	Act of	1940				
1(b).											
(Print or Type F	Responses)										
(Thin of Type I	(coponses)										
1. Name and Address of Reporting Person <u>*</u> PERRY SAM R			2. Issuer Name <b>and</b> Ticker or Trading Symbol TORCHMARK CORP [TMK]				5. Relationship	5. Relationship of Reporting Person(s) to			
							Issuer	Issuer			
(Last)	(First) (N	Aiddle)	3. Date of Earliest Transaction				(Ch	(Check all applicable)			
			(Month/Day/Year)				X Director	X Director 10% Owner			
901 CONGI	RESS AVENUE		01/02/2008				Officer (gi	Officer (give title Other (specify			
(Street)			01/02/2000				below) below)				
			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or	6. Individual or Joint/Group Filing(Check			
							Applicable Line) _X_ Form filed by One Reporting Person				
ALICTINE T	V 70701							More than One			
AUSTIN, T	Λ /δ/01						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurities	Acquired, Disposed	of, or Benefici	ially Owned		
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4. Securiti	es	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executior	n Date, if		nAcquired		Securities	Form: Direct			
(Instr. 3)		any (Month/D	ov/Veor)	Code (Instr. 8)	Disposed (Instr. 3, 4		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
			ay/rear)	(111501.0)	(111501. 5, 4	Failu J)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported	× /	~ /		
						(A) or	Transaction(s)				
				Code V	Amount	(D) Pric	(Instr. 3 and 4)				
Common							2,084	D			
Stock							2,001	D			
Common							0	Ŧ	Not		
Stock							0	Ι	Applicable		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Director Stock Option (Right to Buy)	\$ 59.5	01/03/2007		А	6,000	07/02/2008	01/02/2015	Common Stock	6,000	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
r	Director	10% Owner	Officer	Other		
PERRY SAM R 901 CONGRESS AVENUE AUSTIN, TX 78701	Х					
Signatures						
Sam R. Perry, By /s/ Carol A. Attorney-in-fact	МсСоу,			01/04/2007		
<u>**</u> Signature of Reporting		Date				

## **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).

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.