STONE SPENCER H

Form 4

October 02, 2009

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * STONE SPENCER H

2. Issuer Name and Ticker or Trading Symbol

Issuer

5. Relationship of Reporting Person(s) to

(Last)

(First)

(Middle)

TORCHMARK CORP [TMK]

(Check all applicable)

Controller

below)

3. Date of Earliest Transaction (Month/Day/Year)

09/30/2009

Director X_ Officer (give title

below)

10% Owner Other (specify

TORCHMARK CORPORATION, 2001 THIRD

AVENUE SOUTH

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

(Street)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

BIRMINGHAM, AL 35233

(City)	(State)	Zip) Table	e I - Non-D	Derivative S	ecuri	ties Acqu	ired, Disposed o	f, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8)	4. Securities Acquired or(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock			Code V	Amount	or (D)	Price	(Instr. 3 and 4) 16,000	D	
Common Stock							11,400	I	By Spouse
Common Stock	09/30/2009		I	515.16 (1)	D	\$ 43.43	12,902 (2)	I	Thrift Plan Trust
Common Stock							1,256 (2)	I	Profit Sharing & Retirement Plan Trust

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Torchmark Capital Trust

Preferred 100 D

Securities

III

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.

SEC 1474

(9-02)

9. Nu

Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

	Kelationships
Reporting Owner Name / Address	*

Director 10% Owner Officer Other

STONE SPENCER H TORCHMARK CORPORATION 2001 THIRD AVENUE SOUTH BIRMINGHAM, AL 35233

Controller

Signatures

Spencer H. Stone, By:/s/Carol A. McCoy, Attorney-in-fact

**Signature of Reporting Person Date

Reporting Owners 2

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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 in unitized fund in employee benefit plan estimated conversion of transferred \$ balance to shares using \$43.43 per share.
- (2) Shares in unitized fund in employee benefit plan estimated conversion of \$ balance to shares using \$40.91 per share.

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.