

HORACE MANN EDUCATORS CORP /DE/
Form 4
March 11, 2016

FORM 4

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

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
CONKLIN BRET A

(Last) (First) (Middle)
1 HORACE MANN PLAZA
(Street)
SPRINGFIELD, IL 62715
(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
HORACE MANN EDUCATORS CORP /DE/ [HMN]

3. Date of Earliest Transaction (Month/Day/Year)
03/09/2016

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

____ Director _____ 10% Owner
____ Officer (give title below) _____ Other (specify below)
SVP & Controller

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

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 (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock ⁽¹⁾	03/09/2016		A	V	1,131 A \$ 0	D	
Common Stock ⁽³⁾	03/09/2016		A		3,583.59 A \$ 0	D	
Common Stock						I	0 ⁽⁵⁾

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

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SEC 1474 (9-02)

number.

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. Transaction 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 Security (Instr. 3 and 4)	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 31.01	03/09/2016		A	10,492	08/08/1988 ⁽⁶⁾ 03/09/2026	Common Stock	10,4

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CONKLIN BRET A 1 HORACE MANN PLAZA SPRINGFIELD, IL 62715			SVP & Controller	

Signatures

Linea K. Michael, Attorney in Fact for Bret A. Conklin
Date: 03/11/2016

**Signature of Reporting Person

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).

- (1) The acquisition of Common Stock reported hereby is in the form of restricted stock units which will vest in three equal annual installments beginning March 9, 2017.
- (2) Represents 33,873.205 restricted stock units, 8,600.552 deferred Common Stock equivalent units and 4,028 shares of Common Stock.
- (3) The acquisition of Common Stock reported hereby is in the form of restricted stock units which are fully vested.
- (4) Represents 37,456.795 restricted stock units, 8,600.552 deferred Common Stock equivalent units and 4,028 shares of Common Stock.
- (5) Held by the Horace Mann Supplemental Retirement & Savings Trust (401(K)).
- (6) The option vests in four equal annual installments beginning on March 9, 2017.

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.