HECKMAN PETER H

Form 4 April 01, 2010

FORM 4

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

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)

(Last)

(City)

1. Title of

Security

(Instr. 3)

1. Name and Address of Reporting Person *

HECKMAN PETER H

(First) (Middle)

1 HORACE MANN PLAZA

(Street)

(State)

(Month/Day/Year)

SPRINGFIELD, IL 62715

(Zip)

2. Transaction Date 2A. Deemed

2. Issuer Name and Ticker or Trading Symbol

HORACE MANN EDUCATORS CORP /DE/ [HMN]

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

03/31/2010

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities 5. Amount of

Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Month/Day/Year) (Instr. 8)

(Instr. 3, 4 and 5)

Following Reported (A)

Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price

Issuer

below)

Person

Securities

Owned

Beneficially

Director

Applicable Line)

X_ Officer (give title

Persons who respond to the collection of SEC 1474 information contained in this form are not

number.

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

(9-02)required to respond unless the form displays a currently valid OMB control

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. 5. Number of TransactionDerivative Code Securities

6. Date Exercisable and Expiration

(Month/Day/Year)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

EVP & Chief Financial Officer

6. Ownership

Form: Direct

(D) or Indirect Beneficial

6. Individual or Joint/Group Filing(Check

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

(I)

(Instr. 4)

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

Indirect

Estimated average

burden hours per

7. Title and An Underlying Sec (Instr. 3 and 4)

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(Instr. 3) Price of Derivative Security (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Exercisable Expiration Date Title

Common

 Stock equivalent
 \$ 0 (1)
 03/31/2010
 A
 177.782
 08/08/1988(2)
 08/08/1988(2)
 Common Stock

units

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HECKMAN PETER H 1 HORACE MANN PLAZA SPRINGFIELD, IL 62715

EVP & Chief Financial Officer

Signatures

Ann M. Caparros, Attorney in Fact for Peter H.

Heckman

04/01/2010

**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) Each Common Stock equivalent unit is the economic equivalent of one share of Common Stock.
- The Common Stock equivalent units are estimated based on the market price of Horace Mann Educators Corporation Common Stock and (2) are acquired under the Horace Mann Educators Corporation Deferred Compensation Plan for employees which are to be settled 100% in cash on the earlier of the reporting person's retirement date, termination date or a date certain.

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.

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