

Caldwell William J.
Form 4
March 08, 2018

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 *
Caldwell William J.

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
1 HORACE MANN PLAZA
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
03/06/2018

____ Director
____ Officer (give title below) _____ 10% Owner
____ Other (specify below)
Executive Vice President

SPRINGFIELD, IL 62715

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

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

(City) (State) (Zip)

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 <u>(1)</u>	03/06/2018		A	V	1,863	A	\$ 0	11,424.646 <u>(2)</u>	D	
Common Stock <u>(3)</u>	03/06/2018		A		5,961.607	A	\$ 0	17,386.253 <u>(4)</u>	D	

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

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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)
Employee Stock Option (right to buy)	\$ 42.95	03/06/2018		A	16,832	08/08/1988 ⁽⁵⁾ 03/06/2028	Common Stock 16,832

Reporting Owners

Reporting Owner Name / Address	Relationships
Caldwell William J. 1 HORACE MANN PLAZA SPRINGFIELD, IL 62715	Director 10% Owner Officer Executive Vice President

Signatures

Linea K. Michael, Attorney in Fact for William J. Caldwell
Date: 03/08/2018

**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 6, 2019.
- (2) Represents 1,161.646 vested restricted stock units and 10,263 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 7,123.253 vested restricted stock units and 10,263 shares of Common Stock.
- (5) The option vests in four equal annual installments beginning on March 6, 2019.

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.