HORACE MANN EDUCATORS CORP /DE/

Form 4

October 02, 2007

Check this box

if no longer

subject to

Section 16.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Last)

(City)

Security

(Instr. 3)

(Print or Type Responses)

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

2. Issuer Name and Ticker or Trading Symbol

Issuer

(Middle)

(Zip)

Execution Date, if

(Month/Day/Year)

HORACE MANN EDUCATORS CORP /DE/ [HMN]

below)

(Check all applicable)

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

(First)

(Street)

(State)

(Month/Day/Year)

1 HORACE MANN PLAZA

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

Director 10% Owner X_ Officer (give title Other (specify

5. Relationship of Reporting Person(s) to

09/28/2007

4. If Amendment, Date Original

(Instr. 8)

SVP & Controller 6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line)

X 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

SPRINGFIELD, IL 62715

1. Title of 2. Transaction Date 2A. Deemed

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (T) (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

(Instr. 3, 4 and 5)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and Expiration 7. Title and Amou Derivative Conversion (Month/Day/Year) Execution Date, if **Transaction**Derivative Underlying Securi Security or Exercise any Code Securities (Month/Day/Year) (Instr. 3 and 4)

Edgar Filing: HORACE MANN EDUCATORS CORP /DE/ - Form 4

(Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A)
Derivative or Disposed of Security (D)
(Instr. 3, 4,

(Instr. 3, 4, and 5)

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

or Num of Sl

Amo

Phantom

Stock $\$ 0 \ \underline{\ }\ 0 \ 9/28/2007$ A $36.298 \ 08/08/1988 \ \underline{\ }\ 0 \ 8/08/1988 \ \underline{\ }\$

Units

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

Rhonda R. Armstead, Attorney in Fact for Bret A.
Conklin
10/02/2007

**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) One-for-one.

The phantom stock units are estimated based on the market price of Horace Mann Educators Corporation Common Stock and are

(2) 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.

Reporting Owners 2