**LUTEK BEN** Form 4/A February 10, 2012

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

0.5

Estimated average burden hours per

response...

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

Check this box

obligations may continue.

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 See Instruction

1(b).

Common

(Print or Type Responses)

	•								
1. Name and Ac LUTEK BEN	ldress of Reporting I	Symbol	2. Issuer Name and Ticker or Trading Symbol TORCHMARK CORP [TMK]			5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	(First) (M	(iddle) 3. Date of	3. Date of Earliest Transaction				-)		
TORCHMAI CORPORAT STONEBRII	TON, 3700 SOU	01/23/20	(Month/Day/Year) 01/23/2012			Director 10% OwnerX Officer (give title Other (specify below)  Vice President and Actuary			
	4. If Amer	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
MCKINNEY	7, TX 75070	`	Filed(Month/Day/Year) 01/25/2012			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	Zip) Table	e I - Non-De	erivative Securities Ac	quired, Disposed o	of, or Beneficial	lly 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 on Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

01/23/2012 \$0 A 5,000 A  $16,400 \, \frac{(1)}{}$ D Stock

Family Common  $8,817 \cdot (2)$ I Living Stock Trust

Code V Amount

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.

Reported

Transaction(s) (Instr. 3 and 4)

(A)

(D)

Price

#### Edgar Filing: LUTEK BEN - Form 4/A

# 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 or 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 Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 45.49	01/23/2012		A	37,500	(3)	01/23/2019	Common Stock	37,500

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LUTEK BEN TORCHMARK CORPORATION 3700 SOUTH STONEBRIDGE DRIVE MCKINNEY, TX 75070

Vice President and Actuary

## **Signatures**

Ben Lutek /s/Carol A. Mccoy, Attorney-in-fact

02/10/2012

\*\*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) Amended to reflect calculation error.
- (2) On July 1, 2011, the common stock of Torchmark Corporation split 3-for-2, resulting in reporting person's ownership of 2940 additional common shares.
- (3) First exercisable as to 50% of shares on and after 1/23/2014 and as to remaining 50% of shares on and after 1/23/2015.

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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