

GOCKEL DOUGLAS L
Form 3
February 13, 2013

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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 *
Â GOCKEL DOUGLAS L
(Last) (First) (Middle)

2. Date of Event Requiring Statement
(Month/Day/Year)
01/23/2013

3. Issuer Name and Ticker or Trading Symbol
TORCHMARK CORP [TMK]

4. Relationship of Reporting Person(s) to Issuer

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

UNITED AMERICAN
INSURANCE
COMPANY,Â 3700 SOUTH
STONEBRIDGE DRIVE
(Street)

(Check all applicable)

Director 10% Owner
 Officer Other
(give title below) (specify below)
Officer of Principal Sub.

MCKINNEY,Â TXÂ 75070
(City) (State) (Zip)

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 Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	77,553	D	Â
Common Stock	2,995	I	Family Trust
Common Stock	26,123	I	Thrift Plan Trust

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

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

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1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Employee Stock Option (Right to Buy)	12/11/2006	12/13/2013	Common Stock	18,000	\$ 29.9267	D	Â
Employee Stock Option (Right to Buy)	12/13/2007	12/15/2014	Common Stock	18,000	\$ 37.4934	D	Â
Employee Stock Option (Right to Buy)	12/12/2009	12/12/2013	Common Stock	9,000	\$ 42.4667	D	Â
Employee Stock Option (Right to Buy)	01/19/2010	01/19/2014	Common Stock	9,000	\$ 43.06	D	Â
Employee Stock Option (Right to Buy)	02/26/2011	02/26/2015	Common Stock	21,000	\$ 41.7867	D	Â
Employee Stock Option (Right to Buy)	02/26/2012	02/26/2016	Common Stock	21,000	\$ 15.6667	D	Â
Employee Stock Option (Right to Buy)	Â ⁽¹⁾	02/25/2017	Common Stock	21,000	\$ 30.8734	D	Â
Employee Stock Option (Right to Buy)	Â ⁽²⁾	04/28/2018	Common Stock	22,500	\$ 44.3867	D	Â
Employee Stock Option (Right to Buy)	Â ⁽³⁾	01/23/2019	Common Stock	21,000	\$ 45.49	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GOCKEL DOUGLAS L UNITED AMERICAN INSURANCE COMPANY 3700 SOUTH STONEBRIDGE DRIVE MCKINNEY, TX 75070	Â	Â	Â	Officer of Principal Sub.

Signatures

Douglas L. Gockel, By: /s/Carol A. McCoy,
Attorney-in-fact

02/13/2013

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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).

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- (1) First exercisable as to 50% of shares on 2/25/2012 and the remaining 50% of shares on 2/25/2013.
- (2) First exercisable as to 50% of shares on 4/28/2013 and the remaining 50% of shares on 4/28/2014.
- (3) First exercisable as to 50% of shares on 1/23/2014 and the remaining 50% of shares on 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.