Edgar Filing: NATIONAL WESTERN LIFE INSURANCE CO - Form 4

NATIONAL WESTERN LIFE INSURANCE CO

Form 4

Common

Stock

Class A

Common

12/26/2013

12/26/2013

December 30, 2013

December 3	0, 2013										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL				
	UNITED	STATES			AND EX 1, D.C. 20		ANGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. SECURITIES SECURITIES STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per											
(Print or Type	Responses)										
1. Name and A	Address of Reporting n Mark		Symbol NATIO	NAL W	d Ticker of ESTERN O [NWI	LIF		5. Relationship of Issuer (Check	Reporting Pers		
(3. Date of Earliest Transaction (Month/Day/Year) 12/26/2013					Director 10% Owner Selfow) Other (give title Other (specify below) Sr. VP - CFO			
AUSTIN, T	(Street) TX 78752			endment, D nth/Day/Yea	rate Originar)	al		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	one Reporting Per	rson	
(City)	(State)	(Zip)	Tabl	e I - Non-	Derivative	Secu	rities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	ned 3. 4. Securities Acquired n Date, if Transaction(A) or Disposed of (D) Code (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)			
Class A Common Stock	12/26/2013			M	1,200	A	\$ 150	1,200	D		
Class A Common Stock	12/26/2013			F	804	D	\$ 223.75	396	D		
Class A							\$				

F

S

129

267

D

\$ 223.75

223.75

\$

267

0

D

D

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Stock

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 required to respond unless the form displays a currently valid OMB control number.

(9-02)

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)	Code	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Shar
Stock Appreciation Rights	\$ 210.22					12/11/2016 <u>(1)</u>	12/11/2023	Class A Common Stock	1,0
Stock Appreciation Rights	\$ 132.56					12/14/2014(1)	12/14/2021	Class A Common Stock	1,0
Stock Appreciation Rights	\$ 114.64					02/19/2012(1)	02/19/2019	Class A Common Stock	1,0
Non Qualified Stock Options	\$ 255.13					04/18/2011(2)	04/18/2018	Class A Common Stock	1,0
Non Qualified Stock Options	\$ 150	12/26/2013		M	1,200 (4)	04/23/2009(3)	04/23/2014	Class A Common Stock	1,2

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
			Sr. VP - CFO			

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Pribyl Brian Mark 850 E ANDERSON LANE AUSTIN, TX 78752

Signatures

Brian M. Pribyl 12/30/2013

**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 SARs are exercisable as they vest. The SARs vest in five equal annual installments beginning on the Date Exercisable.
- (2) The options are exercisable as they vest. The options vest in five equal annual installments beginning on the Date Exercisable.
- (3) The options are exercisable as they vest. The options vest in three equal annual installments beginning on the Date Exercisable.
- (4) These shares were sold by the reporting person to the registrant pursuant to the registrant's buy back program.

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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