## Edgar Filing: LINCOLN NATIONAL CORP - Form 4

LINCOLN N Form 4 October 02, 2	JATIONAL COF 2007	RP									
FORM	<b>14</b> UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB AF OMB Number:	PPROVAL 3235-0287		
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed pur sinue. action	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							January 31, Expires: 2005 Estimated average burden hours per response 0.5		
(Print or Type F 1. Name and A LACHMAN	S L	2. Issuer Name <b>and</b> Ticker or Trading Symbol LINCOLN NATIONAL CORP				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	QUARE-WEST 500 MARKET S'	Middle) 3. (I 0	LNC] . Date of Earliest Month/Day/Year) 9/28/2007		ansaction			X Director Officer (give t below)	10%	Owner r (specify	
	(Street) 4. If Amendm Filed(Month/D			dment, Date Original h/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
PHILADEL	PHIA, PA 19102	2						Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Table I - Nor	ı-D	erivative (	Securi	ties Acq	uired, Disposed of	, or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemec Execution D any (Month/Day	Date, if Transac Code	5)	4. Securit n(A) or Dis (Instr. 3, 4)	sposed	of (D)	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	09/28/2007		А		108.64 (1)	А	\$ 65.97	14,911.1 <u>(2)</u>	D		

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

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 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. Transact Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
LACHMAN M LEANNE CENTRE SQUARE-WEST TOWER 1500 MARKET ST., SUITE 3900 PHILADELPHIA, PA 19102	Х							
Signatures								
/s/ Charles A. Brawley, III, Attorney-in-Fact	10/02/2007							
**Signature of Reporting Person		Date						
Explanation of Poononcool								

## 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).
- Quarterly payment of board retainer and fees in shares of phantom stock accrued under the Deferred Compensation Plan for (1) Non-Employee Directors (the "Plan"), which are payable solely in shares of the Company's common stock at resignation or retirement.
- (2) Includes 29.14 shares acquired through dividend reinvestment since the reporting person's last report.

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.