

CNO FINANCIAL GROUP, INC. Reported by NICKELE CHRISTOPHER J

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/22/10 for the Period Ending 03/18/10

Address 11825 N PENNSYLVANIA ST

CARMEL, IN 46032

Telephone 3178176100

CIK 0001224608

Symbol CNO

SIC Code 6321 - Accident and Health Insurance

Industry Insurance (Life)

Sector Financial

Fiscal Year 12/31





Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Expires: February 28, 2011 Estimated average burden hours per response... 0.5

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 30(f) of the Investment Company Act of 1940

1. Name and Adda	ress of Re	porting l	Person *	2	. Iss	uer Nam	e a	nd Tic	cke	r or Tı	adiı	ng Syr	nbol	5. Relatio			Person(s)	to Issuer
Ni de de Chesie	4 11 1	т		('n	JCFCC	\ T	NC I	C	NO 1				(Check al	l applicat	ole)		
					CONSECO INC [CNO] 3. Date of Earliest Transaction (MM/DD/YYYY)								Direct	Director 10% Owner				
														X Offi below)	cer (give titl	e below)	Othe	r (specify
11825 N. PENNSYLVANIA														EVP, Product Management				
STREET																		
													6. Individual or Joint/Group Filing (Check Applicable Line)					
CARMEL, IN	46032													V F	"1.11.0	D		
(City) (State) (Zip)													_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Table l	[- Non-I	Deriv	vativ	e Securi	itie	s Acq	uir	ed, Di	spo	sed of	, or]	Beneficiall	y Owned	[
1.Title of Security (Instr. 3)				2. Tra	ans.	2A. Deemed Execution Date, if	C	Code (Instr. 8)		4. Securities Acquired (A) Disposed of (Instr. 3, 4 and		Followin (Instr. 3 and 5)		ing Reported T	Form Direc		6. Ownership Form: Direct (D) or Indirect	(D) Beneficial Ownership
								Code	V	Amount	(A) or (D)	Price					(I) (Instr. 4)	
Common Stock 3/1				3/18/	/18/2010			A		26700	A	(1)	89262		D			
Tabl	le II - Dei	rivative	Securition	es Be	enefi	icially O	wn	ed (<i>e</i> .	.g.	, puts	, cal	lls, wa	rran	ts, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans.	3A.	4. Trans Code (Instr 8)	5 E S S E E E E E E E E E E E E E E E E	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date 7. Title and Securities Derivative				and A ies Un ive Se	mount of 8. Price of Derivative Security	9. Number of derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis	sable	Expira e Date	ation	Title	Nι	mount or amber of ares		Transaction (s) (Instr. 4)	4)	
Stock Options	\$6.45	3/18/2010		A		70100		(2	2)	3/18/2	2017	Comm Stock		70100	\$0	70100	D	

Explanation of Responses:

- (1) Restricted stock grant with shares vesting in three equal annual installments commencing March 18, 2011.
- (2) One-half of these options vests on March 18, 2012 and the other one-half vests on March 18, 2013.

Reporting Owners

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Nickele Christopher J 11825 N. PENNSYLVANIA STREET			EVP, Product Management	į.					
CARMEL, IN 46032									

Karl W. Kindig, Attorney-in-Fact

3/22/2010

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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.