CITIZENS INC

Form 3

January 17, 2	2017									
				ECURITIES AND EXCHANGE COMMISSION			ON	OMB APPROVAL		
	10		Washington, D.C. 20549					OMB Number:	3235-0104	
		INITIAL S	STATEME	NT OF BENEFICIAL OWNERSHIP OF				Expires:	January 31	
		on 17(a) of		Jtility Holdi	Securities I	Exchange Ad by Act of 193 ct of 1940			Estimated a burden hou response	irs per
(Print or Type F	Responses)									
Person _Statement BUCHHOLTZ WALTER(Month/Da			2. Date of Ev Statement (Month/Day/ 01/09/201	'Year)	Requiring 3. Issuer Name and Ticker or Trading Symbol CITIZENS INC [CIA]				ıbol	
(Last)	(First)	(Middle)						5. If Amendment, Date Original Filed(Month/Day/Year)		
400 E. AND	DERSON L	LANE				100401	I	neu(I	violiul/Day/1ea	1)
	(Street)				(Chec	k all applicable	e) 6	5. Indi	vidual or Join	it/Group
AUSTIN,Â	TXÂ 7875	52					er – low) F source –	X_Fo Person Fo	Check Applica orm filed by On- rm filed by Mor ing Person	e Reporting
(City)	(State)	(Zip)		Table I - I	Non-Deriva	tive Securit	ties Ben	eficia	ally Owned	1
1.Title of Secu (Instr. 4)	rity			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natur Owners (Instr. 5	ship	indirect Benef	ïcial
Citizens, Inc. Class A Common Stock 0				0		D	Â			
Reminder: Rep owned directly	-		ach class of sec	curities benefic	ially	SEC 1473 (7-0	2)			
	inforı requi	mation cont red to respo	pond to the ained in this ond unless th MB control r	form are no ne form disp	t					

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
	(Month/Day/Year)	Derivative Security (Instr. 4) Title	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D)	(Instr. 5)

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships						
		Director 10% Owne		Officer	Other			
BUCHHOLTZ WALTER 400 E. ANDERSON LAN AUSTIN, TX 78752		Â	Â	Vice President, Human Resource	Â			
Signatures								
/s/ Walter S. Buchholtz	01/17/20)17						
**Signature of Reporting Person	Date							
Evalenction of	Deer	-						

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).

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.