FORM 4

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  BECKSTEAD JACK LYNN JR						2. Issuer Name and Ticker or Trading Symbol SECURITY NATIONAL FINANCIAL CORP [ SNFCA ]								able) r	Perso	n(s) to Issur 10% Ow	ner	
(Last) (First) (Middle) PO BOX 57220			(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/21/2006								helow)	Officer (give title Other (specify below)  Vice President-Mortgage Operts				
(Street) SALT LAKE CITY  (City) (State)		JT	84157-0220		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. l Lin	e) X Form fi Form fi					
(City) (State) (Zip)			(Zip)										r erson	. 5.5511				
1. Title of Security (Instr. 3) 2. Trans. Date				. Transac	saction 2A. D Execu Day/Year) if any		a. Deemed ecution Date,		3. Transaction Code (Instr.		osed of, or Benefic  4. Securities Acquired (A) of (D) (Instr. 3, 4		5. Amour	s illy ollowing	Form: Direct		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			msu. 4)	
Class A Common Stock 01/20					)/2006			J <sup>(1)</sup>		1,701	A	\$3.7	4 35,7	35,720(2)		D		
			Table II - De			curities lls, warr							Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Yea	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		of Securitie		ies g Derivativ		9. Number derivative Securities Beneficiall Owned Following Reported Transactio	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount of Number of Shares		(Instr. 4)	on(s)			
Employee Stock Option (right to buy)	\$5.1 <sup>(3)</sup>	03/21/2003		A		17,365 <sup>(3)</sup>		03/21/200	3 0	3/21/2013	Class A Common Stock	17,365 <sup>()</sup>	\$5.1	17,365	(3)	D		
Employee				_														
Stock Option (right to buy)	\$2.93 <sup>(4)</sup>	12/10/2004		A		5,513 <sup>(4)</sup>		12/10/200	4 1	2/10/2014	Class A Common Stock	5,513 <sup>(4</sup>	\$2.93	5,513 <sup>(</sup>	(4)	D		

## **Explanation of Responses:**

- 1. Received pursuant to a 5% stock dividend paid on January 20, 2006.
- 2. Owned jointly by the reporting person and his wife. Does not include 70,457 shares of Class A Common Stock owned indirectly by the reporting person in the 401(k) Retirement Savings Plan, the Employee Stock Ownership Plan (ESOP) and the Deferred Compensation Plan.
- 3. This option was originally reported as covering 15,000 shares of Class A Common Stock at an exercise price of \$5.90 per share, but adjusted to reflect 5% stock dividends on January 5, 2004, January 22, 2005 and January 20, 2006.
- 4. This option was originally reported as covering 5,000 shares of Class A Common Stock at an exercise price of \$3.23 per share, but adjusted to reflect 5% stock dividends on January 22, 2005 and January 20, 2006.
- 5. This option was previously reported as covering 35,000 shares of Class A Common Stock at an exercise price of \$3.51 per share, but adjusted to reflect the 5% stock dividend on January 20, 2006.

01/17/2007 Jack Lynn Beckstead, Jr.

\*\* 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 Number.