## Edgar Filing: AMERICAN EQUITY INVESTMENT LIFE HOLDING CO - Form 4

AMERICAN Form 4 April 08, 20	N EQUITY INVE	STMEN	ſ LIFE I	HOLDIN	G CO						
FORM	лл	STATES		RITIES A			ANGE C	OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Check th if no lon subject t Section Form 4 c	ger <b>STATEN</b> o <b>STATEN</b> 16. or	box <b>STATEMENT OF CHAN</b>				FICL			Expires: Estimated a burden hour response		
Form 5 obligations may continue. See Instruction 1(b). 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(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Samuelson Scott A.								5. Relationship of Reporting Person(s) to Issuer			
	(Check all applicable) Director 10% Owner										
(Last) (First) (Middle) 6000 WESTOWN PARKWAY								X_Officer (give titleOther (specify below) below) Vice President-Controller			
				endment, D nth/Day/Yea	-	al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WEST DES MOINES, IA 50266 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	4. Securi ord Dispo (Instr. 3, Amount	sed of 4 and (A) or		) 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	04/06/2016			P	3,000	A	\$ 13.4477	7 8,888	D		
Common Stock								5,112	Ι	By ESOP	

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 (9-02) required to respond unless the form displays a currently valid OMB control number.

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

## **Reporting Owners**

Reporting Owner Name / Address		R				
1	Director	10% Owner	Officer	Other		
Samuelson Scott A. 6000 WESTOWN PARKWAY WEST DES MOINES, IA 50266	Vice President-Controller					
Signatures						
Debra J. Richardson, by Power of Attorney		04/08/201	6			
**Signature of Reporting Person		Date				
Evaluation of Responses:						

## 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).

This transaction was executed in multiple trades at prices ranging from \$13.44 to \$13.45. The price reported in column 4 is an average
 (1) price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares sold and the prices at which the transactions were settled.

(2) Reflects ESOP allocations that have occurred since the date of the reporting person's last ownership 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.