Edgar Filing: AMERICAN NATIONAL INSURANCE CO /TX/ - Form 4

AMERICAN NATIONAL INSURANCE CO /TX/

Form 4 May 03, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

2. Issuer Name and Ticker or Trading

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

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obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Herz Irwin Max Jr

(Street)

Symbol

5. Relationship of Reporting Person(s) to Issuer

AMERICAN NATIONAL INSURANCE CO /TX/ [ANAT]

(Check all applicable)

(Last)

(First) (Middle) 3. Date of Earliest Transaction

Director

_X__ 10% Owner Officer (give title __X_ Other (specify

ONE MOODY PLAZA

(Month/Day/Year) 05/01/2017

below) below) Advisory Director

6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

Filed(Month/Day/Year)

Person

GALVESTON, TX 77550

(City)	(State)	(Zip) Tab	le I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			5. Amount of Securities Beneficially Owned Following	Ownership Illy Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(msu. +)
Common Stock (1)	05/02/2017		M	750	A	\$ 0	19,613	D	
Common Stock (2)	05/02/2017		F	188	D	\$ 118.17	19,425	D	

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

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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. Transactic Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun Underlying Securit (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
Restricted Stock Units	(3)	05/02/2017		M		750	05/02/2017(4)	05/02/2017(4)	Common Stock	75
Restricted Stock Units	(3)	05/01/2017		A	750		05/01/2018(5)	05/01/2018(5)	Common Stock	75

Reporting Owners

Reporting Owner Name / Address	Relationships							
r	Director	10% Owner	Officer	Other				
Herz Irwin Max Jr ONE MOODY PLAZA GALVESTON, TX 77550		X		Advisory Director				

Signatures

Irwin M. Herz,

Jr.

**Signature of Reporting Person

Date

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).
- (1) This transaction represents the settlement of vested restricted stock units in shares of common stock.
- (2) Shares withheld at the election of Reporting Person to satisfy applicable tax obligations.
- (3) Each restricted stock unit represents a contingent right to receive, upon vesting, one share of Issuer's common stock or, at the election of the reporting person, cash in an amount equal to the closing price of such stock on the date of vesting.
- (4) These restricted stock units vested on May 2, 2017.
- (5) These restricted stock units vest on May 1, 2018, or upon the reporting person's earlier retirement, death or disability.

Reporting Owners 2

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Remarks:

Reporting Person is trustee of the Three R Trusts, which as of the date of this filing has direct beneficial ownership of 9,550 sh

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.