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

	Euguri	inig. / ivi						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
AMERICAN NA Form 4 May 03, 2016	TIONAL IN	ISURANG	CE CO /	TX/						
FORM 4									PPROVAL	
	UNITED		RITIES A		COMMISSIO	N OMB Number:	3235-0287			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations	ection 1	NGES IN SECUF	RITIES ne Securit	Estimated a burden hou response	Estimated average burden hours per response 0.5					
obligations may continue. <i>See</i> Instruction 1(b). (Print or Type Respo				•	•	npany Act ay Act of 1	of 1935 or Section 940	on		
(Thit of Type Respo	11303)									
1. Name and Address of Reporting Person <u>*</u> Ansell William C.			2. Issuer Name and Ticker or Trading Symbol AMERICAN NATIONAL INSURANCE CO /TX/ [ANAT]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
		A. 1. 11 \			_		V D.	100		
				of Earliest T Day/Year) 2016	ransaction		_X_ Director 10% Owner Officer (give title Other (specify below) below)			
			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
GALVESTON,	TX 77550						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
	ansaction Date hth/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D) Price				
Reminder: Report or	a separate line	for each cla	ass of sec	urities benef	ficially own	ned directly o	or indirectly.			
					inform requir	nation cont ed to respo ys a currer	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and Expiration	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Date	Underlying Securitie
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)

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

(Instr. 3)	Price of Derivative Security	tive		ır) (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Restricted Stock Units	<u>(1)</u>	05/02/2016		А		750		05/02/2017 <u>(2)</u>	05/02/2017 <u>(2)</u>	Common Stock	750

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Ansell William C. ONE MOODY PLAZA GALVESTON, TX 77550	Х								
Signatures									
William C. Ansell, by J. Mark Attorney-in-Fact	Flippin as	8		05/03/2016					
**Signature of Reporting	ng 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) 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.
- (2) These restricted stock units vest on May 2, 2017, or upon the reporting person's earlier retirement, death or disability.

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.