SEC Form 5

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FORM	5
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כ	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See
	Instruction 1(b).

Form 3 Holdings Reported.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0362

Estimated average burden	
hours per response:	1.0

<u> </u>			File	ed pursuant to	Sectio	on 16(a) of th	e Secur	ities Excha	nge Act	of 1934																			
Form 4 Tr	ransactions Rep	oorted.		or Section	30(h)	of the	Ínvest	ment C	ompany Ac																					
1. Name and Address of Reporting Person*			2. Issuer Na						<u>/E</u> NT			elationship c eck all applic		ng Pers	on(s) to	Issue	ər													
GERLACH JAMES M				LIFE H							-		Director 10% Owner																	
(Last) (First) (Middle)				X Officer (give title below) Other (specify below) 3 Statement for Issuer's Fiscal Year Ended (Month/Day/Year) The second secon																										
5000 WESTOWN PARKWAY, SUITE 440				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) Executive Vice President 12/31/2008 Executive Vice President																										
(Street)	_			4. If Amend	ment,	Date o	of Origi	inal File	d (Month/D	ay/Year))	6. In Line	dividual or J	oint/Grou	ıp Filing	(Check	Appli	icable												
WEST DE	S IA	50)266	X Form filed by One Reporting Person																										
,					Form filed by More than One Reporting Person													ng												
(City)	(State	e) (Z	ip)																											
		Table	e I - Non-Deriv	ative Secu	iritie	s Ac	quire	ed, Di	sposed	of, or	Benef	ciall	y Owned																	
1. Title of Security (Instr. 3) Date (Month/Day/Year)			Date	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.					sed Of 5. Amoun Securities Beneficial Owned at		Forn Ily (D) d		m: Direct Ir or B		. Nature of ndirect eneficial wnership													
								Amount		(A) or (D)	Price		Issuer's Fi Year (Instr 4)	scal	al (Instr. 4															
Common St	tock												172,000)0 D															
Common St	tock												7,500		Ι	I By Spouse		Spouse												
		Ta	ble II - Deriva (e.g., p)	tive Securi outs, calls,									Owned																	
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. Transaction Code (Instr. 8)	of Derin Secu Acqu (A) c Disp of (D	ivative curities quired or posed D) ttr. 3, 4		ate Exercisable and iration Date nth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			Derivative deriva Security (Instr. 5) Benef Owne Follov Repor		ative O ities Fo icially D d O ving (I) ted action(s)	10. Owners Form: Direct or India (I) (Inst	(D) rect	11. Nature of Indirec Beneficia Ownershi (Instr. 4)												
											Amount or																			
					(A)	(D)	Date	cisable	Expiration Date	Title	of	mber ares																		
Options - Right to Buy	\$10.85						<u> </u>	1/2011	06/11/2018	Com	non),000		40,000),000 D														
Options - Right to Buy	\$10.77						06/3	0/2005	12/31/2014	4 Com Sto		7,500		17,500		17,500		7,500 D												
Options - Right to Buy	\$11						06/1	0/2004	06/10/2014	4 Com Sto		5,000		15,000		15,000		15,000		15,000		15,000		000 D		15,000 D		D		
Options - Right to Buy	\$9						12/0	4/2003	12/04/2013	3 Com Sto		5,000		15,0	000 D		0 D													
Options - Right to Buy	\$9.67						12/2	9/2000	12/29/2010) Com Sto),000		30,0	000 D															
Options - Right to Buy	\$9.67						05/0	5/2000	05/05/201) Com Sto		7,250		17,2	250	D														
Options - Right to Buy	\$7.33						04/1	4/1999	04/14/2009	Com Sto		,250		8,25	50	D														
American Equity Capital Trust I 8% Conv TP	\$10						09/3	0/2002	09/30/2029	Com Sto		,000		3,00	00	D														
Deferred Compensation	\$3.33							(1)	(1)	Com		4,285		24,2	:85	D														

Explanation of Responses:

1. Deferred Compensation Payment is exercisable on the 10th business day after the occurrence of any of the following events: (i) action of the Board of Directors; (ii) written notification of employee's resignation; (iii) employee's termination of employee's disability; (v) employee's death.

<u>Debra J. Richardson, by Power</u>

of Attorney

** Signature of Reporting Person

02/12/2009

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.