

UNITED STATES SECURITIES AND EXCHANGE
COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF
SECURITIES

OMB APPROVAL	
OMB Number:	3235-0104
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* <u>BAM Re Holdings Ltd.</u> (Last) (First) (Middle) <u>IDEATION HOUSE, FIRST FLOOR</u> <u>94 PITTS BAY ROAD</u> (Street) <u>PEMBROKE D0</u> <u>HM08</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>12/21/2023</u>	3. Issuer Name and Ticker or Trading Symbol <u>AMERICAN EQUITY INVESTMENT LIFE HOLDING</u> <u>CO</u> [<u>AEL</u>]	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned			
1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	12,028,979	D ⁽¹⁾⁽²⁾	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* <u>BAM Re Holdings Ltd.</u> (Last) (First) (Middle) <u>IDEATION HOUSE, FIRST FLOOR</u> <u>94 PITTS BAY ROAD</u> (Street) <u>PEMBROKE D0</u> <u>HM08</u> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Brookfield Reinsurance Ltd.</u> (Last) (First) (Middle) <u>IDEATION HOUSE, FIRST FLOOR</u> <u>94 PITTS BAY ROAD</u> (Street) <u>PEMBROKE D0</u> <u>HM08</u> (City) (State) (Zip)
1. Name and Address of Reporting Person*

BAM Re Partners Trust

(Last) (First) (Middle)

PARK PLACE

55 PAR-LA-VILLE ROAD

(Street)

HAMILTON

D0

HM11

(City)

(State)

(Zip)

Explanation of Responses:

1. BAM Re Holdings Ltd. is an exempted company incorporated under the laws of Bermuda and a direct wholly-owned subsidiary of Brookfield Reinsurance Ltd..

2. BAM Re Partners Trust beneficially owns 24,000 Class B limited voting shares of Brookfield Reinsurance Ltd. (the "Class B Shares"), representing 100% of such class of shares. The Class B Shares entitle the holders thereof to appoint one half of the board of directors of Brookfield Reinsurance Ltd. and, as such, may be deemed to indirectly control the decisions of Brookfield Reinsurance Ltd. regarding the vote and disposition of the Common Stock held by BAM Re Holdings Ltd.; therefore BAM Re Partners Trust may be deemed to have indirect beneficial ownership of the Common Stock held by BAM Re Holdings Ltd.

/s/ Anna Knapman-Scott,
Secretary of BAM Re
Holdings Ltd.

12/21/2023

/s/ Anna Knapman-Scott,
Corporate Secretary of
Brookfield Reinsurance
Ltd.

12/21/2023

/s/ Kathy Sarpash, Vice
President of BAM Re
Trustee Ltd., for and on
behalf of BAM Re
Partners Trust

12/21/2023

** 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 5 (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.