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

AMERICAN NATIONAL INSURANCE CO /TX/

Form 4

September 05, 2014

FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL

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Expires: January 31, 2005

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Check this box if no longer

subject to Section 16. Form 4 or Form 5

Form 5 obligations may continue.

See Instruction

SECURITIES

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Elliott Shelby Miller Issuer Symbol AMERICAN NATIONAL (Check all applicable) INSURANCE CO /TX/ [ANAT] (Last) (First) (Middle) 3. Date of Earliest Transaction _X__ Director 10% Owner Other (specify Officer (give title (Month/Day/Year) below) ONE MOODY PLAZA 09/03/2014 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person

GALVESTON, TX 77550

(State)

(Zip)

(City)

(City)	(State)	Tabl	e I - Non-D	erivative	Secur	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securi	ties Ac	equired	5. Amount of	6.	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	n(A) or Di	isposed	d of (D)	Securities	Ownership	Indirect
(Instr. 3)		any	Code	(Instr. 3,	4 and	5)	Beneficially	Form: Direct	Beneficial
		(Month/Day/Year)	(Instr. 8)				Owned	(D) or	Ownership
							Following	Indirect (I)	(Instr. 4)
					(4)		Reported	(Instr. 4)	
					(A)		Transaction(s)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock (1)	09/03/2014		F	500	D	\$ 108.75	6,363	D	

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 required to respond unless the form displays a currently valid OMB control number.

SEC 1474

(9-02)

Person

Form filed by More than One Reporting

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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)		Mumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D)		7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					4, and 5)	Date	Expiration		Amount		
				Code V	(A) (D)	Exercisable	Date	Title	Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
r g	Director	10% Owner	Officer	Other			
Elliott Shelby Miller							
ONE MOODY PLAZA	X						
GALVESTON, TX 77550							

Signatures

Shelby M. Elliott, by J. Mark Flippin as Attorney-in-Fact 09/03/2014

**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).

These 500 shares were withheld at the option of the reporting person to satisfy applicable tax obligations in connection with the expiration of forfeiture restrictions on 2,000 shares of restricted stock. Such 2,000 shares of restricted stock, granted August 1, 2004, were previously included in the reporting person's direct common stock holdings in prior reports on Forms 3 and 4.

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.

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