

Grensteiner Ronald James  
 Form 3  
 July 20, 2009

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Grensteiner Ronald James</p> <p>(Last) (First) (Middle)</p> <p>5000 WESTOWN PARKWAY</p> <p>(Street)</p> <p>WEST DES MOINES, Â IA Â 50265</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>07/08/2009</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>AMERICAN EQUITY INVESTMENT LIFE HOLDING CO [AEL]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner  <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other                  (give title below) (specify below)                  Vice President</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person  <input type="checkbox"/> Form filed by More than One Reporting Person</p>
--	---	--	---	---	--

**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	49,589	D	Â

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

SEC 1473 (7-02)

**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.**

**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 of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable      Expiration Date	Title      Amount or Number of			

Edgar Filing: Grensteiner Ronald James - Form 3

				Shares		(1) (Instr. 5)	
Options-Right to Buy	05/05/2000	05/05/2010	Common Stock	15,000	\$ 9.67	D	Â
Options-Right to Buy	12/31/2000	12/31/2010	Common Stock	30,000	\$ 9.67	D	Â
Options-Right to Buy	12/04/2003	12/04/2013	Common Stock	15,000	\$ 9	D	Â
Options-Right to Buy	06/10/2004	06/10/2014	Common Stock	15,000	\$ 11	D	Â
Options-Right to Buy	06/30/2005	12/31/2014	Common Stock	7,500	\$ 10.77	D	Â
Options-Right to Buy	06/11/2011	06/11/2018	Common Stock	10,000	\$ 10.85	D	Â
Options-Right to Buy	05/08/2012	05/08/2019	Common Stock	20,000	\$ 7	D	Â
Deferred Compensation	Â (1)	Â (1)	Common Stock	4,500	\$ 5.33	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Grensteiner Ronald James 5000 WESTOWN PARKWAY WEST DES MOINES, IA 50265	Â	Â	Â Vice President	Â

## Signatures

Debra J. Richardson, By Power of Attorney  
07/20/2009

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

\* 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).

(1) Deferred Compensation payment is exercisable within 60 days after the occurrence of the earliest of the following events: (i) employee's termination of employment; (ii) a change in control of company; (iii) action of the Board of Directors; (iv) employee's death

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.