FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
The pursuant to be ability of the becantales Exchange 7 for of 1904
or Costion 20(b) of the Investment Company, Act of 1040

			or Sec	ction 30(n) of the in	vesimen	t Com	ipany Act of 19	40					
1. Name and Addres <u>RUSSO THC</u> (Last) <u>AMERICAN IN</u> 175 WATER ST	OMAS A (First) TERNATION	<u>AMEI</u> <u>INC</u> [	f Earliest Transacti	<u>RNA</u>	ΓΙΟ	NAL GRO		ationship of Reporting ( all applicable) Director Officer (give title below) EVP & Ge	10% 0	Owner (specify			
(Street) NEW YORK (City)	NY (State)	4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)						<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>				
		Table I - Nor	n-Derivative S	ecurities Acqu	uired,	Disp	osed of, o	r Benei	ficially O	wned			
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)     4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)       Code (Instr. 8)     0       Code V     Amount				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
[		Table 0				<u> </u>		(D)	ļ	<u> </u>		<u> </u>	

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) if any Code (Inst (Month/Day/Year) 8) ve					6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Unit	\$31.48 <sup>(1)</sup>	06/16/2014		М			2,369.0262 <sup>(2)</sup>	(3)	(3)	Common Stock	2,369.0262	(4)	0.0000	D	
Restricted Stock Unit	\$27.89 <sup>(1)</sup>	06/16/2014		М			2,673.8074 <sup>(5)</sup>	(3)	(3)	Common Stock	2,673.8074	(4)	0.0000	D	

Explanation of Responses:

1. Represents AIG's share price on the date of grant; these securities do not carry a conversion or exercise price.

2. Represents the payment in cash of \$130,249.06, before applicable taxes, in settlement of stock salary based on AIG's share price on June 16, 2014.

3. These securities do not have an exercisable date or expiration date.

4. These securities do not carry a conversion or exercise price.

5. Represents the payment in cash of \$147,005.93, before applicable taxes, in settlement of stock salary based on AIG's share price on June 16, 2014.

<u>/s/ Patricia M. Carroll, by POA</u> for Thomas A. Russo

06/18/2014

Date

\*\* Signature of Reporting Person

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.