FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| Estimated average burden | |
|--------------------------|-----|
| hours per response: | 0.5 |

l

| 1. Name and Address of Reporting Persor <u>LEWIS ROBERT EDWARE</u> | 2 | 2. Issuer Name and Ticker or Trading Symbol <u>AMERICAN INTERNATIONAL GROUP</u> <u>INC</u> [AIG] | | tionship of Reporting Pers all applicable) Director Officer (give title below) | on(s) to Issuer 10% Owner Other (specify below) | |
|----------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------------------------------|------------------------|--------------------------------------------------------------------------------------------|----------------------------------------------------------|--|
| (Last) (First) (Middle) AMERICAN INTERNATIONAL GROUP, INC. 180 MAIDEN LANE | | 3. Date of Earliest Transaction (Month/Day/Year) 12/10/2010 | | Senior Vice President | | |
| (Street) NEW YORK NY (City) (State) | 10038 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing Form filed by One Repo Form filed by More than Person | rting Person | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | ction | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--------------------------------------------|-------------------------------------------------------------|------------------------------|-------|-------------------------------------------------------------------------|---------------|-------|---------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |

 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | Deri Sec Acq or D of (E | umber of vative urities uired (A) visposed D) (Instr. and 5) | e Expiration Date (Month/Day/Year) (A) sed str. | | 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 Transaction(s) | 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 | | (Instr. 4) | | |
| Restricted Stock Unit | \$30.12 ⁽¹⁾ | 12/10/2010 | | М | | | 370.9 ⁽²⁾ | (3) | (3) | Common Stock | 370.9 | (4) | 38,030.47 | 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 payout of \$18,155.76, net of applicable taxes, in stock salary payable in cash based on AIG's share price on the first anniversary of the deemed grant date, to be paid on the next payroll date.

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

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

<u>/s/ Kathleen E. Shannon, by</u> POA for Robert E. Lewis

12/14/2010

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.