| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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| Section obligat | this box if no lo n 16. Form 4 or tions may conti ction 1(b). | | | Estimated average burden | | | | | | | | | | | | 3235-0287 0.5 | | |
|---|--|---|---|--------------------------|---|---|---|--|--------|--------------------|---|-----------------|---|---|---|---------------------------|---|---|
| 1. Name and Address of Reporting Person* SCHREIBER BRIAN T (Last) (First) (Middle) AMERICAN INTERNATIONAL GROUP, INC. | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>AMERICAN INTERNATIONAL GROUP</u> <u>INC</u> [AIG] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | elationship of Reporting Person(s) to Issuer eck all applicable) Director 10% Owner X Officer (give title Other (specif below) below) Executive Vice President | | | | vner |
| 180 MAIDEN LANE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indiv | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| NEW YO | | NY State) | 10038 (Zip) | | X Form | | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting F | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | Date | th/Day/Year) if an | | 2A. Deemed Execution Date, if any (Month/Day/Yea | Code (Instr. | | | | | | 4 and 5) Securities Beneficially Following R | | Owned (D) or eported (I) (Ins | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | v | Amount | (A) (D) |) or) | Price | - Transaction(s) (Instr. 3 and 4) | | | | (Instr. 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 | Date Executi (Month/Day/Year) if any | 3A. Deemed Execution Date, if any (Month/Day/Year) | | insaction De de (Instr. Se Au Di | | umber of ivative urities uired (A) or posed of (D) tr. 3, 4 and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title a Securitie Derivativ (Instr. 3 a | es Un ve Se | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Numl derivati Securiti Benefic Owned Followi Reporte | ve ies :ially ng | Ownershi Form: | Beneficial Ownership t (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisabl | | Expiration Date | Title | Nu | nount or umber of nares | | Transac (Instr. 4 | ction(s) | | |
| Restricted Stock Unit | \$30.12 ⁽¹⁾ | 03/19/2012 | | М | | | 2,080.8602 ⁽²⁾ | (3) | Τ | (3) | Commor Stock | ¹ 2, | 080.8602 | (4) | 42,360 |).4798 | 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 \$57,847.92, net of applicable taxes, in settlement of stock salary based on AIG's share price on March 19, 2012.

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

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

/s/ Kathleen E. Shannon, by POA 03/21/2012

for Brian T. Schreiber

** 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 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.