## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* <u>Hogan Kevin T.</u>						2. Issuer Name and Ticker or Trading Symbol AMERICAN INTERNATIONAL GROUP INC [ AIG ]									all applic Directo	cable)	10% Owner give title Other (specify			
(Last) (First) (Middle)  AMERICAN INTERNATIONAL GROUP, INC.  175 WATER STREET					09/2	3. Date of Earliest Transaction (Month/Day/Year) 09/29/2017									X Officer (give title Officer (specify below)  Executive Vice President					
(Street)  NEW Y(	NEW YORK NY 10038				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ar) i	CUrities  2A. Deeme Execution if any (Month/Da	ed Date,	3. 4. Transaction Di Code (Instr. 5)		4. Securi	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	Prio	e	Reported Transact (Instr. 3	tion(s)			(Instr. 4)		
		7	able II - [						uired, Di , options						wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, T	4. Transaction Code (Instr. 8)		n of		6. Date Exercisal Expiration Date (Month/Day/Year		Amount of		f g Security		3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Ow For Oir Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		xpiration ate	Title	Amou or Numb of Shares	er						
2017 Restricted Stock Units	(1)	09/29/2017			A		91 <sup>(1)</sup>		(1)		(1)	Common Stock	91		(1)	16,989	)	D		
Restricted Stock Units	(2)	09/29/2017			A		545 <sup>(2)</sup>		(2)		(2)	Common Stock	545		(2)	102,24	7	D		

## **Explanation of Responses:**

- 1. These securities are dividend equivalent rights in the form of 2017 Restricted Stock Units with respect to 2017 Restricted Stock Units previously awarded under the American International Group, Inc. 2013 Omnibus Incentive Plan. The 2017 Restricted Stock Units vest in January 2020, subject to the reporting person's continued employment through the vesting date, and are settled in shares of AIG Common Stock
- 2. These securities are dividend equivalent rights in the form of Restricted Stock Units with respect to Restricted Stock Units previously awarded under the American International Group, Inc. 2013 Omnibus Incentive Plan. The Restricted Stock Units vest in March 2019, subject to the reporting person's continued employment through the vesting date, and are settled in shares of AIG Common Stock on a 1 to 1

/s/ James J. Killerlane III, by POA for Kevin T. Hogan

10/02/2017

\*\* 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.