FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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1	OMB APPROVAL								
	OMB Number:	3235-0287							
1	Estimated average burden								

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	Check this box if no longer subject to							
)	Section 16. Form 4 or Form 5							
J	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

Name and Address of Reporting Person* Liverage 1. December 2.					2. Issuer Name and Ticker or Trading Symbol AMERICAN INTERNATIONAL GROUP								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Hancock Peter D.					INC [AIG]							X	X Director			10% Owner		
(Last) (First) (Middle)													Officer (gibelow)	ve title		Other (sp below)	ecify	
AMERICAN INTERNATIONAL GROUP, INC.					Date of Earliest Transaction (Month/Day/Year)							$\overline{}$	President & CEO					
175 WATER STREET				09/30/2014														
(Street) NEW YORK NY 10038					4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date					n/Day/Year) if any		Execution Date,	Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4		ed (A) or tr. 3, 4 and 5)	5. Amount of Securities Beneficially Following F	Owned (D) of the control (D) of the control (I) (Ir	Form:	: Direct Ir Indirect B str. 4) C	. Nature of ndirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	Price	Transaction (Instr. 3 and			l (II	nstr. 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)	Title of cerivative Conversion Date Coductive or Exercise (Month/Day/Year) if any Coductive Codu		4. Transa Code (5. Number of Baction Derivative			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 Exercisabl		xpiration ate	Title	Amount or Number of Shares	1					
Restricted Stock Unit	\$32.79 ⁽¹⁾	09/30/2014		M			2,144.8991 ⁽²⁾	(3)		(3)	Common Stock	2,144.899	. (4)	0.00	00	D		
Restricted Stock Unit	\$21.95 ⁽¹⁾	09/30/2014		M			2,722.2174 ⁽⁵⁾	(3)	Ι	(3)	Common Stock	2,722.217	(4)	0.00	00	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 \$115,867.45, before applicable taxes, in settlement of stock salary based on AIG's share price on September 30, 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 \$147,054.18, before applicable taxes, in settlement of stock salary based on AIG's share price on September 30, 2014.

/s/ Patricia M. Carroll, by POA 10/02/2014 for Peter D. Hancock

** 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.