FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* SCHREIBER BRIAN T					2. Issuer Name and Ticker or Trading Symbol AMERICAN INTERNATIONAL GROUP INC [AIG]							(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					
(Last) (First) (Middle) AMERICAN INTERNATIONAL GROUP, INC. 175 WATER STREET					3. Date of Earliest Transaction (Month/Day/Year) 05/30/2014							X	X Officer (give title Other (specify below) Executive Vice President					
(Street) NEW YORK NY 10038					4. If Amendment, Date of Original Filed (Month/Day/Year)						l	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(\$	State)	(Zip)															
			Table I - Non-	Deriva	tive	Sec	urities Acc	quired, l	Disp	osed o	f, or Ber	neficially (Owned					
1. Title of Security (Instr. 3) 2. Trans: Date (Month/L				Date	(Day/Year) Exe		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr.) 8) 4. Securities Acquired Disposed Of (D) (Instr.			5. Amount Securities Beneficially Following	.	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Ir Indirect B tr. 4) O	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o	Price	Reported Transaction (Instr. 3 and			"	nstr. 4)		
			Table II - D				rities Acqu , warrants,	,	•	,		•	vned					
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)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		Transaction(s)	tion(s)			
Restricted Stock Unit	\$28.89 ⁽¹⁾	05/30/2014		М			1,901.276 ⁽²⁾	(3)		(3)	Common Stock	1,901.276	(4)	0.00	00	D		
Restricted Stock Unit	\$28.88 ⁽¹⁾	05/30/2014		М			1,901.771 ⁽⁵⁾	(3)		(3)	Common	1,901.771	(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 \$102,801.99, before applicable taxes, in settlement of stock salary based on AIG's share price on May 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 \$102,828.76, before applicable taxes, in settlement of stock salary based on AIG's share price on May 30, 2014.

/s/ Patricia M. Carroll, by POA 06/03/2014 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.