FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

| Name and Address of Reporting Person* BENMOSCHE ROBERT H | | | | | | 2. Issuer Name and Ticker or Trading Symbol AMERICAN INTERNATIONAL GROUP INC [AIG] | | | | | | | | | heck all ap | pplicable) ector | | Person(s) to Issuer 10% Owner | |
|---|--|---|--|--|----------------|---|---|--------|--|-----------|--|---|---------------------------|----------------|--|---|---|---|--|
| (Last) 180 MAI | Last) (First) (Middle) 80 MAIDEN LANE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/28/2011 | | | | | | | | | X Offi beli | , | Other (specify below) nt & CEO | | |
| (Street) NEW YO (City) | NEW YORK NY 10038 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | ay/Year) Exe | | A. Deemed xecution Date, any Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | d Secu Bene | nount of rities ficially ed Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | Code | v | Amount | (A (D |) or) | Price | Tran | saction(s) r. 3 and 4) | | | (| | | |
| Common Stock 10/28/ | | | | | | | 2011 | | A | | 5,823(1 | (1) A \$2 | | \$26. | 34 | 200,874 | | | |
| | 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 | Exercise ce of ivative (Month/Day/Year) if any (Month/Day/Year) | | | | ransaction ode (Instr.) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owne Form: Direct or Ind (I) (Ins | (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. These shares are restricted from transfer until August 10, 2014 pursuant to the Annual Stock Salary Award Agreement with the Company dated January 3, 2011, as amended and restated as of April 12, 2011. This award reflects 10,951 shares less 5,128 shares withheld for taxes.

> /s/ Kathleen E. Shannon, by POA for Robert H. Benmosche

10/31/2011

** 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.