FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

(II	IE2	AND	EXCHANGE	COMMISSIO

OMB APPROV	/AL
OMB Number:	3235-028
Estimated average burden	

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).

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

1. Name and Address of Reporting Person* <u>Hancock Peter D.</u>				2. Issuer Name and Ticker or Trading Symbol AMERICAN INTERNATIONAL GROUP INC [AIG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (spec							
(Last) (First) (Middle) AMERICAN INTERNATIONAL GROUP, INC. 175 WATER STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/31/2014							X Officer (give title Officer (specify below) Executive Vice President							
(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)	?)	State)	(Zip)															
			Table I - Non	-Deriv	ative	Se	curities Acc	quired, [Disp	osed o	f, or Bei	nefici	ially O	wned				
Date				Date	e E onth/Day/Year) it		2A. Deemed Execution Date, if any (Month/Day/Yea	Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 an		or and 5)	5. Amount of Securities Beneficially Following R	Owned eported	6. Own Form: (D) or I (I) (Inst	Direct In ndirect B r. 4) O	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount (A) or (D)		or P	rice	Transaction(s) (Instr. 3 and 4)				nstr. 4)
							urities Acqu s, warrants,							ned	•			
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)	Transaction Code (Instr. 8)		Der Sec Acc Dis	lumber of ivative curities quired (A) or posed of (D) ctr. 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)		lying	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 Exercisabl		xpiration ate	Title	Amou Numb Share	er of		Transaction(s) (Instr. 4)	tion(s)		
Restricted Stock Unit	\$33.46 ⁽¹⁾	03/31/2014		М			1,785.7941 ⁽²⁾	(3)		(3)	Common Stock	1,78	5.7941	(4)	0.00	000	D	
Restricted Stock Unit	\$32.48 ⁽¹⁾	03/31/2014		М			2,174.2757 ⁽⁵⁾	(3)		(3)	Common Stock	2,17	4.2757	(4)	0.00	000	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 \$89,307.56, before applicable taxes, in settlement of stock salary based on AIG's share price on March 31, 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 \$108,735.53, before applicable taxes, in settlement of stock salary based on AIG's share price on March 31, 2014.

/s/ Patricia M. Carroll, by POA

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.