FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burd	len								
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*     Machon Monika M					2. Issuer Name and Ticker or Trading Symbol AMERICAN INTERNATIONAL GROUP INC [ AIG ]						(Ched	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (spec				ner	
(Last) (First) (Middle)  AMERICAN INTERNATIONAL GROUP, INC., 70 PINE ST.					3. Date of Earliest Transaction (Month/Day/Year) 03/18/2010						_ ^	X Officer (give title Other (specify below)  Senior Vice President					
(Street) NEW YO		Y State)	10270 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Ind Line)							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3) 2. Tran				Transact ate			3. Transac Code (I 8)	ction	4. Securities Disposed O	s Acquired	(A) or	5. Amount of Securities For Beneficially (D)		Form:	Direct I Indirect E tr. 4)	7. Nature of ndirect Beneficial Dwnership Instr. 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	nsaction Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		es J Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e S Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)			
Restricted Stock Unit	(1)	03/18/2010		A		725 <sup>(2)</sup>		(2)		(1)	Common Stock	725	\$0 <sup>(2)</sup>	5,979.4	48	D	
Restricted Stock Unit	(1)	03/18/2010		A		119 <sup>(3)</sup>		(3)		(1)	Common Stock	119	\$0 <sup>(3)</sup>	6,098.4	48	D	
Restricted Stock Unit	\$30.12	03/19/2010		М			137.93 <sup>(4)</sup>	(4)		(1)	Common Stock	137.93	\$0 <sup>(4)</sup>	24,768.	.35	D	

## **Explanation of Responses:**

- 1. These securities do not carry a conversion price or expiration date.
- 2. This award represents fully vested RSUs that will be payable in cash based on AIG's share price on the third anniversary of the grant date, and will be paid on the next payroll date after the amount is determined. This award reflects 743 shares less the 18 shares withheld for taxes
- 3. This award represents fully vested RSUs that will be payable in cash based on AIG's share price on the first anniversary of the grant date, and will be paid on the next payroll date after the amount is determined. This award reflects 122 shares less the 3 shares withheld for taxes.
- 4. Represents payout of \$4,799.92, net of applicable taxes, in stock salary payable in cash based on AIG's share price on the first anniversary of the deemed grant date, to be paid on the next payroll date.

## Remarks:

/s/ Kathleen E. Shannon, by POA for Monika M. Machon

03/22/2010

\*\* 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.