

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

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>AMERICAN INTERNATIONAL GROUP INC</u>  (Last) (First) (Middle) <u>180 MAIDEN LANE</u>  (Street) <u>NEW YORK NY 10038</u>  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>10/15/2013</u>	3. Issuer Name and Ticker or Trading Symbol <u>CLEARBRIDGE AMERICAN ENERGY MLP FUND INC. [ CBA ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) _____ <p style="text-align: center;"><u>See Remarks</u></p>	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
<u>4.51% Series C Senior Secured Notes due October 15, 2023</u>	<u>\$30,000,000</u>	<u>I</u>	<u>Held through subsidiaries<sup>(1)</sup></u>
<u>4.66% Series D Senior Secured Notes due October 15, 2025</u>	<u>\$40,000,000</u>	<u>I</u>	<u>Held through subsidiaries<sup>(2)</sup></u>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

**Explanation of Responses:**

- American General Life Insurance Company, Commerce and Industry Insurance Company and United Guaranty Residential Insurance Company, each an indirect wholly owned subsidiary of American International Group, Inc. ("AIG"), directly hold \$19,725,000 principal amount, \$9,525,000 principal amount and \$750,000 principal amount, respectively, of the Series C Senior Secured Notes. AIG is an indirect beneficial owner of the Series C Senior Secured Notes.
- The Variable Annuity Life Insurance Company, American Home Assurance Company, American General Life Insurance Company, The United States Life Insurance Company in the City of New York and United Guaranty Residential Insurance Company, each an indirect wholly owned subsidiary of AIG, directly hold \$17,000,000 principal amount, \$12,700,000 principal amount, \$5,300,000 principal amount, \$4,000,000 principal amount and \$1,000,000 principal amount, respectively, of the Series D Senior Secured Notes. AIG is an indirect beneficial owner of the Series D Senior Secured Notes.

**Remarks:**

Filed pursuant to Section 30(h) of the Investment Company Act of 1940. The referenced securities are senior secured debt securities which the Reporting Person is informed represent, in the aggregate, in excess of 10% of the senior secured debt securities of the Issuer.

/s/ Monika Machon, 10/18/2013  
Authorized Person  
 \*\* 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 5 (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.