FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|----------------|------|-------|
| vvasiliigtoii, | D.C. | 20070 |

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OWNERSHIP

| wasinington, | D.C. 20343 | |
|--------------|------------|--|
| | | |
| | | |

| | OMB APPROVAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|
| | OMB Number: | 3235-0362 | | | | | | |
| | Estimated average burden | | | | | | | |
| 1 | hours per response. | 1.0 | | | | | | |

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Check this box if no longer subject to

| Form 3 | Holdings Repo | rted. | | | | | | | | | | | [| aro per | теоропос. | 1.0 |
|---|---|--|---|---|--|---|--|--|--|--|--|--|---|---------------|---|---|
| Form 4 | Transactions R | Reported. | File | ed pursuant to or Sectior | | | | | ities Excha ompany Ac | | | | | | | |
| 1. Name and Address of Reporting Person* Consolino Joseph E (Last) (First) (Middle) 301 E. FOURTH STREET | | | | 2. Issuer Name and Ticker or Trading Symbol <u>AMERICAN FINANCIAL GROUP INC</u> [AFG] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) | | | | <u>VC</u> [(| 5. Relationship of Reporting R Check all applicable) X Director X Officer (give title below) Executive Vice | | | 10% Othe belo | Owner er (specify w) | | | |
| 40TH FLOOR | | | | 12/31/20 | 12/31/2018 | | | | | | | | | | | |
| (Street) CINCINNATI OH 45202 (City) (State) (Zip) | | | | | | endment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Application) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | rson | | | | | |
| | | Tabl | e I - Non-Deriv | ative Sec | uritie | s Ac | quire | d, Di | sposed (| of, or | Benefici | ally Ow | ned | | | |
| Date | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. r) 8) | | 4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5) | | | or Disposed | 5. Amount of Securities Beneficially Owned at end | | 6. Ownership Form: Direct f (D) or | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Amour | mount (A) or (D) Price | | Price | Issuer's Fiscal Year (Instr. 3 ar 4) | | Indirect (I) | | (Instr. 4) |
| Common Stock | | | | | | | | | | | 1 | 193,861 | | D | | |
| Common | Stock | | | | | | | | 2,256.7572 I ESPP | | ESPP ⁽¹⁾ | | | | | |
| Common | Common Stock | | | | | | | | | | | 4 | 1.8754 | | T I | ESPP DRIP ⁽²⁾ |
| | | Та | ble II - Derivat (e.g., p | ive Securi uts, calls, | | | | | | | | y Owne | d | | | |
| 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) | 4. Transaction Code (Instr. 8) | of Deriv Secu Acqu (A) or Dispo | rivative curities quired or sposed (D) str. 3, 4 d 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr.: and 4) Amoun or Numbe of Title Shares | | 8. Price of Derivative Security (Instr. 5) | | e s lly | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) |

Explanation of Responses:

- 1. Shares allocated to the Reporting Person's account under the Issuer's Employee Stock Purchase Plan ("ESPP"). All ESPP information reporting herein is based on a plan statement dated as of 12/31/2018.
- 2. Represents shares purchased by the Reporting Person through dividend reinvestment within the Issuer's Employee Stock Purchase Plan ("ESPP"). All ESPP DRIP information reporting herein is based on a plan statement dated as of 12/31/2018.

Remarks:

Joseph E. (Jeff) Consolino 02/13/2019

** 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.