SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-0287

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 32 |
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| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 | Estimated average burden hours per response: | |
| or Section 30(h) of the Investment Company Act of 1940 | 1 | |

| · | | | | r Section 30(h) of the li | | . , | - | | | | | | |
|---|------------------------|------------|----------------|--|-----------------|--------------------------------|-------------------|--|-----------------|------------|--|--|--|
| 1. Name and Address of Reporting Person* VERITY WILLIAM W | | | A | . Issuer Name and Tick MERICAN FII MFG] | | Symbol L <u>GROUP INC</u> [| | tionship of Reportir all applicable) Director Officer (give title | 10% (| | | | |
| (Last) 301 EAST FOU | (First) JRTH STREET | (Middle) | | . Date of Earliest Trans 2/20/2023 | action (Month | /Day/Year) | | below) | below | | | | |
| , | | | 4 | . If Amendment, Date c | f Original File | d (Month/Day/Year) | 6. Indiv Line) | /idual or Joint/Grou | p Filing (Check | Applicable | | | |
| (Street) | | | | | | | X | Form filed by One | e Reporting Per | son | | | |
| CINCINNATI | ОН | 45202 | | | | | | Form filed by Mo Person | re than One Re | porting | | | |
| (City) (State) (Zip) | | | | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | |
| | Та | ble I - No | on-Derivativ | e Securities Acc | uired, Dis | posed of, or Benef | ficially | Owned | | | | | |
| 1. Title of Security | (Instr. 3) | | 2. Transaction | 2A. Deemed | 3. | 4. Securities Acquired (A) | or | 5. Amount of | 6. Ownership | 7. Nature | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following | (D) or Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------|---|---|---------------|----------|---|-----------------|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (IIISU. 4) |
| Common Stock | 12/20/2023 | | S | | 2,274 | D | \$120.26 | 10,457 | D | |

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) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/N | Amou Secu Unde Deriv | rities rlying ative rity (Instr. | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership | Beneficial Ownership (Instr. 4) | | | |
|---|---|--|---|------------------------------|---|-----|-----|--|-------------------------------|---|---|--|-----------|---------------------------------------|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

William W. Verity By: Karl J. 12/20/2023

Grafe, as Attorney-in-Fact

** 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See [Instruction 1(b).