Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20040

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL

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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 BERDING JOHN B						AMERICAN FINANCIAL GROUP INC [AFG]								Check all applicable) X Director				10% Ow	ner	
(Last) (First) (Middle) 301 EAST FOURTH STREET 27TH FLOOR					11	3. Date of Earliest Transaction (Month/Day/Year) 11/08/2016								X Officer (give title Other (specify below) President of Subsidiary						
(Street) CINCINNATI OH 45202			_ 4. _	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					1			
(City)	(S		(Zip)			- 0-		· •				D								
1. Title of Security (Instr. 3) 2. Trans			2. Transac	unsaction 2/ Ex th/Day/Year) if		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amour Securitie Beneficia Owned F		nt of es ally Following	Form: Direct		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Price	Reporte Transa (Instr. 3		tion(s)			(Instr. 4)			
Common	Stock				1/08/2016				M		10,000	A	\$27.2	.2 85,		,296.661		D		
Common	Stock			11/08/2	2016				S		10,000	D	\$76.459	8(1)	75,296.661 D		D			
Common	Stock														233 I			I]	By Trust	
Common	Stock									Ш					4,159 ⁽²⁾ I I			ESPP		
Common	ommon Stock												1,264.097(3)			I 4	401(k)			
			Table								posed of, , converti			y Owr	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code (8)				6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		Deriv Secu	ative rity	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly C	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	ode V	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares							
Stock Option Exercise	\$27.2	11/08/2016			M			10,000	(4)	02/21/2018	Commo	n 10,000	\$0	.00	0		D		

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$76.23 to \$76.62, inclusive. The reporting person undertakes to provide to American Financial Group, Inc., ("AFG"), any security holder of AFG, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote (1).
- 2. Shares allocated to the Reporting Person's account under the Issuer's Employee Stock Purchase Plan (the "ESPP"). All ESPP information reported herein is based on a plan statement dated as of 12/31/2015.
- $3. \ Represents \ shares \ held \ in the \ Issuer's \ 401(k) \ Retirement \ and \ Savings \ Plan. \ The \ number \ of \ shares \ of \ Common \ Stock \ is \ based \ on \ a \ Plan \ Statement \ dated \ as \ of \ 12/31/2015.$
- 4. These Employee Stock Options become exercisable in five equal installments beginning on the first anniversary of the grant date.

Remarks:

John B. Berding By: Karl J. Grafe, as Attorney-in-Fact

** Signature of Reporting Person

11/10/2016

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.