FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* LINDNER S CRAIG				<u>A</u>	2. Issuer Name and Ticker or Trading Symbol AMERICAN FINANCIAL GROUP INC AFG]										k all applic Directo	or 10		son(s) to Iss 10% Ov Other (s	ner		
(Last) 301 EAS	(F T FOURTI	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/24/2014										below)	-CEO &	Co-P	below)	респу	
(Street) CINCIN		itate)	45202 (Zip)		-	4. If Amendment, Date of Original Filed (Month/Day/Year)										Form fi Form fi Person	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/L				saction	1	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3,			d (A) d	or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Pri	се	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			02/24/2014		.4			A ⁽¹⁾		13,32	.0	A	\$	0.00	1,457,428			I	#1 ⁽²⁾		
Common	Stock															112	112,461 I #3 ⁽³				
Common	Stock															29,153.78 I #12 ⁽⁴⁾				#12 ⁽⁴⁾	
Common	Stock														2,366,296 I #27 ⁽⁵⁾					#27 ⁽⁵⁾	
		-	Гable II -						uired, D , option							wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemec Execution E if any (Month/Day	Date,	4. Transaction Code (Instr. B)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da	Date		7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		es Secur	5	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Cod	Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amou or Numb of Share	mber						
Stock Option	\$56.44	02/24/2014			A		50,000		(6)	0	2/24/2024	Com	nmon	50,0	00	\$0.00	50,000	0	D		

Explanation of Responses:

- 1. Represents the grant of restricted stock from the Issuer that vests four years from the date of grant.
- 2. Indirect #1: SCL TTEE of the SCL Living Trust DTD 03/30/83.
- $3.\ Indirect\ \#3:\ By\ Frances\ R.\ Lindner,\ Trustee\ for\ the\ Frances\ R.\ Lindner\ living\ Trust\ dated\ 9/13/93.\ (SCL)$
- 4. Indirect #12: Held in the Company's Retirement and Savings Plan. The number of shares of Common is based on a statement dated as of 12/31/2012. (SCL)
- 5. Indirect #27: Shares voting and dispositive power and holds a remainder interest in shares held directly or indirectly by a charitable lead annuity trust. The reporting person disclaims beneficial interest of the shares held by the trust except to the extent of his pecuniary interest in such shares.
- 6. Theae Employee Stock Options become exercisable in five equal installments beginning on the first anniversary of the grant date.

Remarks:

S. Craig Lindner By: Karl J. Grafe, as Attorney-in-Fact

02/24/2014

** 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.