FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

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

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* EVANS JAMES E					2. Issuer Name and Ticker or Trading Symbol AMERICAN FINANCIAL GROUP INC AFG]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
EVANS JAMES E															AF	X Directo	or		10% Ov	vner	
,					- 111												(give title		Other (s	specify	
(Last)	(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)										below)	N)		below)		
301 EAST FOURTH STREET					11/11/2016																
(Street)					- 4. If	f Ame	endmei	nt, Date	of C	Original F	iled	(Month/Da	ay/Year)		6. Ir Line		Joint/Group	Filinç	g (Check Ap	plicable	
CINCIN	NATI O	Н	45202													X Form t	iled by One	Repo	orting Perso	n	
					-											Form to Person		e thar	n One Repo	rting	
(City)	(S	tate)	(Zip)																		
		Tab	le I - No	n-Deriv	ative	e Se	curit	ies Ac	qu	uired, [Disp	osed c	of, or E	ene	eficial	y Owned	ł				
			2. Trans	action		2A. Deemed Execution Date,						curities Acquired (A)			5. Amount of Securities		6. Ownership Form: Direct		7. Nature of Indirect		
				Date (Month/Day/Year)		y/Year) if any		ny		Code (Instr.		Disposed Of (D) (Instr. 3, 4				Benefici	ally	(D) or Indirect	r Indirect	Beneficial	
							(Month/Day/Year)		ar)	r) 8)						- Reporte	Owned Following Reported			Ownership (Instr. 4)	
										Code	٧	Amount	(A)	or	Price	Transac (Instr. 3					
Common Stock			11/11	1/2016	2016			М		2,000) .	4	\$27.2	2 135	135,001		D				
Common Stock			11/11	1/2016	2016			S		2,000	0)	\$79.9	133	133,001		D				
Common Stock															11,37	1.669 ⁽¹⁾		I	ESPP		
		1	able II -	Deriva	tive	Sec	uritie	s Acq	uir	red, Di	spc	sed of	, or Be	nefi	icially	Owned					
				(e.g., p	uts,	call	s, wa	rrants	s, c	ptions	s, c	onverti	ble se	curi	ties)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		n of		Ex	Date Exe piration I lonth/Day	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Ow For Dire or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Da	ate ercisable		xpiration ate	Title	OI No	umber						
Stock			 	-	2000	Ė	(-)	(5)	_^		+			+				-			
Option Evergise	\$27.2	11/11/2016			M			2,000		(2)	12	2/31/2017	Commo	n 2	2,000	\$0.00	0		D		

Explanation of Responses:

- 1. Shares allocated to the Reporting Person's account under the Issuer's Employee Stock Purchase Plan. All ESPP information reporting herein is based on a plan statement dated as of 12/31/2015.
- 2. In connection with the Reporting Person's retirement as an employee of the Company, the Employee Stock Options were accelerated to be fully vested and exercisable.

Remarks:

James E. Evans By: Karl J. Grafe, as Attorney-in-Fact

11/15/2016

** 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.