Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	HР
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**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  MISCHELL THOMAS E						2. Issuer Name and Ticker or Trading Symbol AMERICAN FINANCIAL GROUP INC AFG ]										all applic Directo	able)	g Pers	on(s) to Iss 10% Ov Other (s	vner		
(Last) ONE EA	•	First) FH STREET	, , ,					3. Date of Earliest Transaction (Month/Day/Year) 02/22/2007										? Ta:	below) xes			
(Street) CINCINNATI OH 45202					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(S		(Zip)												. 5.5511							
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D				action	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Trans	action (Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				or 5. Amou		nt of s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount		A) or D)	Price	Transportion(s)					(111341.4)		
Common	Stock															153	153,754 D					
Common	Stock															1,5	500	#1 <sup>(1)</sup>				
Common	Stock														16,354.2111 I				I	#2 <sup>(2)</sup>		
Common	Stock															42,64	1.433	3 I #3 <sup>(3)</sup>				
			Table II -								osed of					wned						
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. Transaction Code (Instr. 8)				6. Date E Expiration (Month/E	n Date		of Sec Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		D	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				c	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amoun or Numbe of Shares	r							
Employee Stock Option	\$36.57	02/22/2007			A		43,750		(4)		02/22/2017	Comm		43,75	0	\$0.00	43,75	0	D			

## **Explanation of Responses:**

- $1. \ Indirect \#1: Represents one-half of the 3,000 \ shares held \ by \ a \ general partnership of which the Reporting Person is \ a 50\% \ partner.$
- 2. Indirect #2: Shares allocated to the Reporting Person's account under the Issuer's Employee Stock Purchase Plan (the "ESPP"). All ESPP information reporting herein is based on a plan statement dated as of
- 3. Indirect #3: The Company Retirement and Savings Account. The number of shares of Common Stock which would be represented by the value of the Reporting Person's Company Securities Funds account in the Issuer's Retirement and Savings Plan is based on a statement dated as of 12/31/2006.
- 4. Indirect #4: These Employee Stock Options ("Options") become exercisable as to 20% of the shares initially granted on the first anniversary of the date of grant, with an additional 20% becoming exercisable on each subsequent anniversary. The Options were granted under the Issuer's Stock Option Plan pursuant to Rule 16b-3.

## Remarks:

Thomas E. Mischell By: Karl J. Grafe, as Attorney-in-Fact

02/26/2007

\*\* 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.