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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPRC | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
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| hours per response: | 0.5 |

| 1. Name and Address of Reporting Person* <u>Consolino Joseph E</u> | | | 2. Issuer Name and Ticker or Trading Symbol <u>AMERICAN FINANCIAL GROUP INC</u> [AFG] | | ationship of Reporting Person(s) to Issuer (all applicable) Director 10% Owner Officer (give title Other (specif | | |
|---|--------------------|----------------|---|------------------------|--|---------------------|--|
| (Last) 301 E. FOURTH 40TH FLOOR | 1 E. FOURTH STREET | | 3. Date of Earliest Transaction (Month/Day/Year) 02/21/2017 | | below) Executive Vice | below) President | |
| (Street) CINCINNATI (City) | OH (State) | 45202 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | vidual or Joint/Group Filir Form filed by One Re Form filed by More tha Person | porting Person | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | on(s) | |
| Common Stock | 02/21/2017 | | F | | 4,042 | D | \$93.98 | 109,166 | D | |
| Common Stock | 02/22/2017 | | A ⁽¹⁾ | | 8,475 | Α | \$0.00 | 117,641 | D | |
| Common Stock | | | | | | | | 1,898 | Ι | ESPP ⁽²⁾ |

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) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed | Expiration Date (Month/Day/Year) | | Amount of | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Represents the grant of restricted stock from the Issuer that vests four years from the date of grant.

2. Shares allocated to the Reporting Person's account under the Issuer's Employee Stock Puchase Plan ("ESPP"). All ESPP information reporting herein is based on a plan statement dated as of 12/31/2016. **Remarks:**

Joseph E. (Jeff) Consolino

<u>02/23/2017</u> Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.