FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-02									

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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

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1. Name and Address of Reporting Person*  JOSEPH GREGORY G							2. Issuer Name <b>and</b> Ticker or Trading Symbol  AMERICAN FINANCIAL GROUP INC											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
JUSEPH GREGORY G						AF	AFG ]										X Director				10% C	wner		
(Last)		(First)	(1)	Middle)		_										_		Office below	er (give title v)			(specify		
ONE EAST FOURTH STREET							3. Date of Earliest Transaction (Month/Day/Year)																	
SUITE 919						00/	06/04/2009																	
							4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)																- [	X	Form	n filed by One	e Rep	oorting Pers	on		
CINCINI	NATI	OH	4	5202													Form filed by More than One Reporting							
(City)	(	(State)	(2	Zip)			Person																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
Date					2. Trans Date (Month/		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. r) 8)						d (A) o r. 3, 4	4 and Se Be Ov		Amount of curities neficially yned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Cod	de V		Amount (A) or (D)		Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock 06/04/					4/200	2009			A			4,705	4,705 A		Г	(1)	13,780			D				
Common Stock																	50,424			I	#1(2)			
Common Stock																		3	3,000		I	#2(3)		
Common Stock																		7,500			I	#3(4)		
	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	on Date se (Mon	ansaction hth/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction Code (Instr.		umber vative urities uired or osed ) r. 3, 4 5)	6. Date Expira (Monti	tion D	ate	ble and	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		l	Deri Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((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 Exerci	sable		xpiration ate	Title	or Nu of	mber ares								

- 1. Represents a grant of Restricted Stock issued under the Company's Non-Employee Director's Compensation Plan.
- 2. Indirect #1: Held by a company in which the Reporting Person is a minority shareholder and for which he serves as an executive officer.
- 3. Indirect #2: Held by a company in which the Reporting Person is a minority shareholder and for which he serves as an executive officer.
- 4. Indirect #3: Held by a company in which the Reporting Person is a minority shareholder and for which he serves as an executive officer.

## Remarks:

Gregory G. Joseph By: Karl J. Grafe, as Attorney-in-Fact

06/08/2009

\*\* 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.