### Edgar Filing: AMERICAN FINANCIAL GROUP INC - Form 5

#### AMERICAN FINANCIAL GROUP INC

Form 5

February 14, 2014

**OMB APPROVAL** FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer Consolino Joseph E Symbol AMERICAN FINANCIAL GROUP (Check all applicable) INC [AFG] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) \_X\_ Director 10% Owner \_X\_\_ Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2013 Executive Vice President 301 E. FOURTH STREET. 40TH **FLOOR** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) CINCINNATI. OHÂ 45202 \_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 5. Amount of 6. Ownership 7. Nature of 4. Securities Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year or (Instr. 3 and 4) (D) Price Amount Common Â Â Â Â Â Â 122,953 D Stock Common Â Â Â Â Â Â ESPP (1) 540.945 Ι Stock Persons who respond to the collection of information **SEC 2270** Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. contained in this form are not required to respond unless (9-02)

the form displays a currently valid OMB control number.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.          | 5.         | 6. Date Exerc | cisable and | 7. Titl | e and    | 8. Price of |
|-------------|-------------|---------------------|--------------------|-------------|------------|---------------|-------------|---------|----------|-------------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transaction | Number     | Expiration D  | ate         | Amou    | int of   | Derivative  |
| Security    | or Exercise |                     | any                | Code        | of         | (Month/Day/   | Year)       | Under   | lying    | Security    |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8)  | Derivative | e             |             | Secur   | ities    | (Instr. 5)  |
|             | Derivative  |                     |                    |             | Securities |               |             | (Instr. | 3 and 4) |             |
|             | Security    |                     |                    |             | Acquired   |               |             |         |          |             |
|             |             |                     |                    |             | (A) or     |               |             |         |          |             |
|             |             |                     |                    |             | Disposed   |               |             |         |          |             |
|             |             |                     |                    |             | of (D)     |               |             |         |          |             |
|             |             |                     |                    |             | (Instr. 3, |               |             |         |          |             |
|             |             |                     |                    |             | 4, and 5)  |               |             |         |          |             |
|             |             |                     |                    |             |            |               |             |         | Amount   |             |
|             |             |                     |                    |             |            | Date          | Evniration  |         | or       |             |
|             |             |                     |                    |             |            | •             | Expiration  | Title   | Number   |             |
|             |             |                     |                    |             |            | Exercisable   | Date        |         | of       |             |
|             |             |                     |                    |             | (A) (D)    |               |             |         | Shares   |             |

## **Reporting Owners**

| Reporting Owner Name / Address | Relationships |
|--------------------------------|---------------|
|--------------------------------|---------------|

Director 10% Owner Officer Other

Consolino Joseph E

301 E. FOURTH STREET 40TH FLOOR CINCINNATI, OHÂ 45202

### **Signatures**

Joseph E. (Jeff)
Consolino
02/14/2014

\*\*Signature of Reporting Date
Person

# **Explanation of Responses:**

- \* 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).
- (1) 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 12/31/2013.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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