#### Edgar Filing: AMERICAN FINANCIAL GROUP INC - Form 4

#### AMERICAN FINANCIAL GROUP INC

Form 4

March 12, 2007

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

**OMB APPROVAL** 

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if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * LINDNER S CRAIG			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer					
			AMERI INC [Al		JANCIAL GROUP	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction	_X_ Director	10%				
			(Month/D	•		_X_ Officer (gives below)	below)	er (specify			
ONE EAST FOURTH STREET			03/08/20	007		Co-CEO & Co-President					
	(Street)		4. If Ame	ndment, Da	te Original	6. Individual or J	Ioint/Group Filin	ng(Check			
			Filed(Mon	th/Day/Year)	)	Applicable Line)					
					_X_ Form filed by One Reporting Person Form filed by More than One Reporting						
CINCINNA	TI, OH 45202					Person	More than One Re	eporting			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Securities Acq	quired, Disposed o	of, or Beneficial	lly Owned			
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature			
Security	(Month/Day/Ye	ear) Execution	on Date, if	Transactio	on(A) or Disposed of	Securities	Form: Direct	Indirect			

(City)	(State)	Zip) Table	I - Nor	ı-De	erivative S	ecuriti	ies Acq	uired, Disposed o	f, or Beneficial	ly 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 (Instr.		4. Securitin(A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	03/08/2007		A		57,297	A	\$0	57,297	D	
Common Stock	02/14/2007		G	V	658	A	\$0	3,474,792	I	#1 (1)
Common Stock								0	I	#2 (2)
Common Stock	02/14/2007		G	V	658	A	\$0	77,594	I	#3 (3)
Common Stock	02/14/2007		G	V	658	A	\$0	25,217	I	#5 <u>(4)</u>

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Common Stock	02/14/2007	G	V	658	A	\$0	25,217	I	#6 (5)
Common Stock							24,559	I	#7 <u>(6)</u>
Common Stock							145,321	I	#8 (7)
Common Stock							1,020,043	I	#9 (8)
Common Stock							1,485,000	I	#10 (9)
Common Stock							24,234.909	I	#12 (10)
Common Stock							2,181,409	I	#13 (11)
Common Stock							63,604	I	#14 (12)
Common Stock							63,604	I	#15 (13)
Common Stock							63,604	I	#16 (14)
Common Stock	02/14/2007	G	V	658	A	\$ 0	658	I	#17

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transaction	5. orNumber	6. Date Exerc Expiration D		7. Tit		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/		Unde Secur	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

(9-02)

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LINDNER S CRAIG

ONE EAST FOURTH STREET X Co-CEO & Co-President

CINCINNATI, OH 45202

# **Signatures**

S. Craig Lindner By: Karl J. Grafe, as Attorney-in-Fact

03/12/2007

\*\*Signature of Reporting Person

Date

### **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) Indirect #1: By S. Craig Lindner, Trustee for the S. Craig Lindner Living Trust dated 3/30/83.
- (2) Indirect #2: Malott Nyhart, Trustee of the SCL 1996-2 Qualified Annuity Trust dated 3/28/96.
- (3) Indirect #3: By Frances R. Lindner (spouse), Trustee for the Frances R. Lindner Living Trust dated 9/13/93.
- (4) Indirect #5: Corinne E. Lindner, TTEE, CEL 2002 Living Trust DTD 11/14/02.
- (5) Indirect #6: By Frances R. Lindner (spouse), Custodian for minor child.
- (6) Indirect #7: By Frances R. Lindner (spouse), Custodian for minor child.
- (7) Indirect #8: By Keith E. Lindner, Trustee under an Irreocable Trust Indenture with Frances R. Lindner dated 2/13/85.
- (8) Indirect #9: KEL, TTEE Under an Irrev. Trust Ind. with SCL DTD 12/22/83.
- (9) Indirect #10: SCL Investments, LLC
  - Indirect #12: The Company Retirement and Savings Account. The number of shares of Common Stock which would be represented by
- (10) 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.
- (11) Indirect #13: SCL, TTEE of the SCL 2005-1 Qualified Annuity Trust DTD 4/21/05.
- (12) Indirect #14: M. Nyhart, TTEE Corinne Under Trust Agreement dated 3/8/96.
- (13) Indirect #15: M. Nyhart TTEE Clara Under Trust Agreement dted 3/8/96.
- (14) indirect #16: M. Nyhart TTEE Christine Under Trust Agreement dtd 3/8/96.

Note: File three copies of this Form, one of which must be manually signed. If space 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.

Reporting Owners 3