FORM 4

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

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										

0.5

hours per response:

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

1. Name and Address of Reporting Person*  Evans James E				2. Issuer Name <b>and</b> Ticker or Trading Symbol AMERICAN FINANCIAL GROUP INC [ AFG ]										5. Relationship of Rep (Check all applicable) X Director Officer (give t			g Pers	on(s) to Is 10% Ov Other (s	vner		
(Last) (First) (Middle) 301 EAST FOURTH STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/12/2024											below	)		below)			
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									) 6. Lir		,					
(City)	(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication																
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														nded to		
		Table	I - N	Non-Deriva	tive S	Secui	rities	Acq	uir	ed, D	isposed	of, o	or E	Benefici	ally	Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			(A) or 3, 4 and 5)		5. Amo Securit Benefic Owned Reporte	ies ially Following	Form: (D) or Indire	Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Cod	de '	V A	Amount	(A) oi (D)	r P	rice		Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(111501. 4)	
Common Stock				03/12/2024				S			2,274	D	\$	128.6445	5(1)	105,301.9667			D		
Commom Stock																	2,672			By GRAT	
Common Stock															3,670				By GRAT II		
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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			Transaction of Code (Instr. 8) Sec Acc (A) Dis		of Deriv Secur Acqu (A) or Dispo	vative urities uired proposed b) tr. 3, 4			Exercisable and on Date Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		0. Dwnership orm: Direct (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V (A		(A)	(D)	Date (D) Exercisa		Expiration Date		itle	Amount or Number of Shares	ər						

## Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$128.63 to \$128.67, inclusive. The reporting person undertakes to provide to American Financial Group, Inc., ("AFG"), any security holder of AFG, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote to this Form 4

James E. Evans By: Karl J. Grafe, as Attorney-in-Fact

03/13/2024

\*\* Signature of Reporting Person Dat

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

- $^{\star}$  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.