Edgar Filing: LOEWS CORP - Form 4

LOEWS CODD

LOEWS CO	RP										
Form 4											
November 14	4, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PPROVAL	
	UNITE	ED STATE:		shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer								Expires:	January 31, 2005		
subject to STATEMENT OF CHANGE						ICIA	L OW	NERSHIP OF	Estimated a		
	Section 10.				ITIES				burden hou		
Form 4 or Form 5		nurcuant to	Section 1	6(a) of the	. Socurit	ioc E	lychong	e Act of 1934,	response	0.5	
obligation	ns Section	-					-	1935 or Section	n		
may cont	inue.			•	•	· ·	•		1		
1(b).	<i>See</i> Instruction 30(h) of the Investment Company Act of 1940										
(Print or Type F	Responses)										
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Relationship of I								Reporting Pers	son(s) to		
DIKER CHARLES M Symbol				I Name and Ticker of Trading				Issuer			
5ymbor				WS CORP [L]							
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check					k all applicable	e)		
			(Month/D	Month/Day/Year)				X_ Director 10% Owner			
730 FIFTH AVENUE, 15TH 11/12/2				2014				Officer (give title Other (specify below) below)			
FLOOR											
				nendment, Date Original			6. Individual or Joint/Group Filing(Check				
Filed(Month/				h/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORK, NY 10019											
								Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I			3.	4. Securi		-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Ye	ear) Execution any	on Date, if	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Form: Direct Indirect (D) or Beneficial	Indirect Beneficial	
(Instr. 5)		•	Day/Year) (Instr. 8)			5)	Owned	Indirect (I)	Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	11/12/2014			М			\$	4 500	D		
Stock	11/12/2014			111	1,500	А	23.45	4,500	D		
Common	11/10/2014			C	1 500	D	\$	2 000	D		
Stock	11/12/2014			S	1,500	D	43.24	3,000	D		

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

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 control number.

Edgar Filing: LOEWS CORP - Form 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)				8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 23.45	11/12/2014		М	1,500	12/31/2004	12/31/2014	Common Stock	1,500	

Reporting Owners

Reporting Owner Name / Address								
r g the the test	Director	10% Owner	Officer	Other				
DIKER CHARLES M 730 FIFTH AVENUE, 15TH FLOOR NEW YORK, NY 10019	Х							
Signatures								
/s/ Gary W. Garson by power of attorney for Charles M.								
Diker			1	1/13/2014				
** Signature of Reporting Perso			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) The Reporting Person received the Derivative Security pursuant to a stock option grant at no cost.

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.