FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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| l | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | |

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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* BERMAN ANN E | | | | | | 2. Issuer Name and Ticker or Trading Symbol LOEWS CORP [L] | | | | | | | | Relationship of Report (Check all applicable) Director | | | ing Person(s) to Issuer | |
|--|---|------------|---------|--------------------------------|------------------------------|---|---|---|--------------------------------|-------|-------------------------------------|--|--|--|--|----------------|--|--|
| (Last) | ast) (First) (Middle) 44 COOLIDGE HILL | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2016 | | | | | | | | (give title | | Other (s below) | |
| (Street) CAMBRIDGE MA 02138 | | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | dividual or Joint/Group Filing (Check Applicable) Complete Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | ction | 2A. E Exec if an | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. | | 4. Securities Acquired | | (A) or | 5. Amou Securitie Beneficia Owned F | 5. Amount of Securities Beneficially Owned Following | | : Direct I · Indirect I str. 4) (| 7. Nature of Indirect Beneficial Ownership |
| | | | | Code | v | Amount | | | (A) or (D) | Price | Reported Transact (Instr. 3 a | ion(s) | | | Instr. 4) | | | |
| Common S | 2016 | | | | M | | 1,500 | A | \$41.85 | 1, | 500 | | D | | | | | |
| Common Stock 12/01/2 | | | | | | 2016 | | | | | 1,399 | D | \$44.87 | 1 | 01 | D | | |
| Common Stock 12/01/2 | | | | | | 2016 | | | S | | 101 | D | \$45.15 | 1) | 0 | | D | |
| | | Та | able II | | | | | | | | oosed of, convertib | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | if any | emed ion Date, Day/Year) | 4. Transa Code (8) | | | vative urities uired or oosed O) tr. 3, 4 | 6. Date Expirati (Month/ | on Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Appreciation | \$41.85 | 12/01/2016 | | | M | | | 1,500 | 12/31/2 | :006 | 12/31/2016 | Common Stock | 1,500 | \$0 ⁽²⁾ | 0 | | D | |

Explanation of Responses:

- 1. Represents the weighted average price of multiple transactions with a range of prices between \$44.87 and \$45.21. The Reporting Person, upon request by the Commission Staff, the Issuer or a security holder of the Issuer, undertakes to provide further information regarding the number of securities of each separate price sold.
- 2. The Reporting Person received the Derivative Security pursuant to a stock appreciation right grant at no cost.

/s/ Glenn P. Zarin by power of attorney for Ann E. Berman

12/02/2016

** 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.