## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burden										
- 1	houre per reenonce.	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

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1. Name and Address of Reporting Person*  LASKAWY PHILIP A						2. Issuer Name <b>and</b> Ticker or Trading Symbol LOEWS CORP [ L ]									lationship c k all applic		Reporting Person(s) to Issue ble)				
LASKA										X	Directo	r		10% Ov	vner						
	C/O LOEWS CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 09/01/2021								Officer below)	(give title		Other (s below)	specify		
667 MAD	ISON AVE	NUE			4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Ctroot)														Line)							
(Street) NEW YORK NY 10065															X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(Sta	te) (2	'ip)																		
		Tabl	e I - No	on-Deriv	ative	Seci	uritie	es Acc	quired	, Dis	sposed o	f, or Bei	nefic	ially	Owned						
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Executi y/Year) if any			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a				Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	)	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common S	2021	:021			M		1,500	A	\$3	5.04	8,8	,865		D							
Common Stock 09/01/2						2021					939	D	\$5	5.97	7 7,926		D				
Common Stock 09/01/2						2021					561	D	\$55	.62(1)	52 <sup>(1)</sup> 7,365		D				
Common Stock														6,000				By Spouse			
		Ta	able II								osed of, convertib				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, (Day/Year)	4. Transaction Code (Instr. 8)		5. Number n of		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e (C s   F ally   C g (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shai	ber							
Stock Appreciation Right	\$35.04	09/01/2021			М			1,500	09/30/2	2011	09/30/2021	Common Stock	1,5	00	<b>\$0</b> <sup>(2)</sup>	0		D			

## **Explanation of Responses:**

- 1. Represents the weighted average price of multiple transactions with a range of prices between \$55.61 and \$55.97. 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 at each separate price sold.
- 2. The Reporting Person received the Derivative Security pursuant to a stock appreciation right grant at no cost.

/s/ Thomas H. Watson by power of attorney for Philip A. 09/01/2021 **Laskawy** 

\*\* Signature of Reporting Person Date

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.