FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| - 1 | | | | | | |
|-----|--------------------------|-----------|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | |
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| | hours per response: | 0.5 | | | | |
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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

| | lame and Address of Reporting Person* ARRIS WALTER L | | | | | | 2. Issuer Name and Ticker or Trading Symbol LOEWS CORP [L] | | | | | | | | tionship c all applic Directo | able) | g Pers | on(s) to Issu 10% Ov | | |
|---|---|---|---------|--------------------------------|----------------|--|---|---|---|----------------------|--|--|--|--|---|--|---|--|--|--|
| (Last) 28 EAST 2 | | 3. Date of Earliest Transaction (Month/Day/Year) 09/04/2018 | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | | | | | |
| (Street) NEW YORK NY 10016 | | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | fividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (Sta | | ip) | on Doriv | otivo | Sooi | .viti | | auirod | Dia | anacad o | f or Bo | ooficial | | Dunod | | | | | |
| 1. Title of Security (Instr. 3) 2. Tran | | | | 2. Transac | tion | 2A. E Exec if any | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | (A) or | 5. Amou Securition Benefici Owned I | | nt of s ally following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | : Direct I r 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 Stock | | | | 09/04/2 | 2018 | | | | M | | 1,500 | A | \$38.3 | 8 12, | | ,175 | | D | | |
| Common Stock | | | | 09/04/2 | /2018 | | | | D | | 1,143 | D | \$50.3 | 4 11, | | ,032 | | D | | |
| Common S | tock | | | 09/04/2 | 2018 | | | | S | | 357 | D | \$50.03 | (1) | 10, | 10,675 D | | | | |
| | | Ta | able II | | | | | | | | osed of, convertib | | | / Ov | vned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | if any | emed on Date, (Day/Year) | | Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Exercion Da Day/Y | | 7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4) | | De Se | Price of erivative ecurity istr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (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 | Amount or Number of Shares | mber | | | | | | |
| Stock Appreciation | \$38.38 | 09/04/2018 | | | M | | | 1,500 | 09/30/2 | :008 | 09/30/2018 | 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 \$50.02 and \$50.34. 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/ Glenn P. Zarin by power of attorney for Walter L. Harris

09/05/2018

** 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.