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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

| OMB APP | ROVAL |
|---------------------|-----------|
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| hours per response. | 0.5 |

| 1. Name and Address of Reporting Person* <u>TISCH PRESTON R</u> | | | 2. Issuer Name and Ticker or Trading Symbol <u>LOEWS CORP</u> [LTR] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|------------|--|--|--|--------|------------------|--|--|--|
| | | | | | Director | Х | 10% Owner | | | |
| (Last) (First) (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | x | Officer (give title below) | | Other (specify below) | | | | | |
| 667 MADISON AVENUE | | | 12/01/2004 | Chairman of the Board | | | | | | |
| (Street) NEW YORK, | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | ridual or Joint/Group | Filing | Check Applicable | | | |
| NEW YORK | X1 | 10021-8087 | | X | Form filed by One | • | 0 | | | |
| , | | | - | | Form filed by More than One Re Person | | One Reporting | | | |
| (City) | (State) | (Zip) | | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Disposed C Code (Instr. 5) | | 4. Securities / Disposed Of (5) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
|---------------------------------|--|---|---|---|--|---------------|-------|---|---|---|--|--|--|--|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | | | |
| Common Stock | 12/01/2004 | | G | | 225,000 | D | \$0 | 1,292,915 | Ι | By Spouse | | | | |
| Common Stock | | | | | | | | 8,419,072 | I | By Trusts | | | | |
| Common Stock | | | | | | | | 19,649,390 | D | | | | | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| (cigi, puts, cars, 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. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form: | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

Remarks:

/s/ Gary W. Garson by power

of attorney for Preston R. Tisch

** 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.