FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average I | hurden | | | | | | | | |

0.5

hours per response:

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* HOFMANN HERBERT C | | | | | 2. Issuer Name and Ticker or Trading Symbol LOEWS CORP [LTR;CG] | | | | | | | | | | eck all appli Directo | cable) or | g Pers | Person(s) to Issuer 10% Owner Other (specific | | | |
|---|---|--|--|--------|---|---|--|---------------------------------|------------|---|-------|-------------------|--|--------------------------------|--|---|---|--|--|--|--|
| (Last) 667 MA | (I DISON AV | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2004 | | | | | | | | | X below) | | | респу | | | |
| (Street) NEW YOU | ORK N | ΙΥ | 10021-8087 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (; | <u> </u> | (Zip) | | | | | | | | | | | | <u> </u> | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | action | ar) it | 2A. Deemed Execution Date, if any (Month/Day/Year) | | , | 3. Transac Code (li 8) | tion | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | (A) or | 5. Amou Securiti Benefic | int of es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | | Code | v | Amount | () | A) or D) | Price | Transac (Instr. 3 | tion(s) | | | (Instr. 4) | |
| Common Stock 11/30 | | | | /2004 | 2004 | | | | М | | 9,000 |) | A | \$46.7 | 1 9, | 9,000 | | D | | | |
| Common Stock 11/30/ | | | | /2004 | 2004 | | | S | | 8,300 |) | D | \$69.8 | 5 7 | 700 | | D | | | | |
| Common Stock 11/30/ | | | | /2004 | 4 | | | | S | | 700 | | D | \$69.8 | 7 0 | | | D | | | |
| | | ٦ | Гable II - | | | | | | | | | sed of onverti | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | i. Fransaction Code (Instr. | | n of l | | Exp | Date Exe piration ponth/Day | Date | ible and | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 4) | 8. Price of Derivative Security (Instr. 5) | | e (Constitution of the Constitution of the Con | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | Code | v | (A) | (D) | Dat Exe | te ercisabl | | xpiration ate | Title | N O | Amount or Jumber of Shares | | | | | | |
| Stock Option | \$46.71 | 11/30/2004 | | | M | | | 9,000 | | (1) | 0 | 1/24/2011 | Comn | | 9,000 | (2) | 3,400 | | D | | |

Explanation of Responses:

1. The option became exercisable in four equal annual installments beginning on January 24, 2002.

2. The Reporting Person received the Derivative Security pursuant to a stock option grant at no cost.

Remarks:

/s/ Gary W. Garson, by power 12/01/2004 of attorney for Herbert C.

Hofmann

** 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.