## Edgar Filing: CNA FINANCIAL CORP - Form 4

CNA FINA	NCIAL CORP											
Form 4												
November (	07, 2008											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
UNITED STATES SECUR				RITIES AND EXCHANGE COMMISSION shington, D.C. 20549					OMB Number:	3235-0287		
Check this box if no longer subject to STATEMENT OF CHA				HANGES IN BENEFICIAL OWNERSHIP OF					Expires:	January 31,		
			CHAN						Estimated a	2005 verage		
Section 16.				SECUI	RITIES				burden hours per			
Form 4 Form 5					<b>a</b>	Б		A ( 61024	response	0.5		
obligatio	200						-	Act of 1934,				
may con	iunue.			•	t Company	• •		1935 or Section				
<i>See</i> Instr 1(b).	ruction	50(II) V	or the fi	ivestillen	t Company	y 1 ICI	01 1740	,				
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u></u>			2. Issuer Name <b>and</b> Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer				
LOLING	on		Symbol	INANCI	AL CORP	ICN	<b>Δ</b> 1					
			CNA FINANCIAL CORP [CNA]					(Check all applicable)				
667 MADISON AVENUE (Month. 11/06/				Date of Earliest Transaction onth/Day/Year)				Director X 10% Owner				
			11/06/2	-			·	Officer (give title below)     Other (specify below)				
			4. If Am	Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mo	nth/Day/Yea	ur)			Applicable Line)				
NEW YOR	K, NY 10065-80	87						_X_ Form filed by O Form filed by Mo Person				
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative S	ecuri	ties Acqu	ired, Disposed of,	or Beneficial	y Owned		
1.Title of	2. Transaction Date	2A. Deeme	ed	3.	4. Securitie	s Acq	uired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if	Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities	Ownership	Indirect		
(Instr. 3)		any (Month/Da	v/Vear)					Beneficially Owned	Form: Direct (D)	Beneficial Ownership		
		(Month/Da	.y/ 1 cai )	(1154.0)			Following		(Instr. 4)			
						(A)		Reported	(I)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
				Code V	Amount	(D)	Price ¢	(mour o unu r)				
Common	11/06/2008			Р	118,600	А	\$ 14.59	241,838,273	D			
Stock					- , •		<u>(1)</u>	,,				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	' (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
I B	Director	10% Owner	Officer	Other			
LOEWS CORP 667 MADISON AVENUE NEW YORK, NY 10065-8087		Х					
Signatures							
Loews Corporation by /s/ Gary W. Garson, Senior Vice President							

\*\*Signature of Reporting Person

## **Explanation of Responses:**

\* 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).

Represents the weighted average price of multiple transactions with a range of prices between \$14.10 and \$15.00. The Reporting Person, (1) 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 purchased at each separate price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

11/07/2008

Date