Edgar Filing: LOWES COMPANIES INC - Form 4

LOWES COMPA Form 4 October 04 2016	NIES INC								
October 04, 2016 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer STATEMENT OF CHANCES IN DEMERICIAL OWNERSHIP (N OMB Number: Expires:	PPROVAL 3235-0287 January 31, 2005
a in to tonget STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average subject to Section 16. SECURITIES Estimated average Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 0.5 See Instruction 1(b). 30(h) of the Investment Company Act of 1940 1940									
(Print or Type Response) 1. Name and Address WISEMAN ERIC	of Reporting	Person <u>*</u>	Symbol	er Name and S COMPA		Trading NC [LOW	5. Relationship o Issuer		
(Last) (First) (Middle) 1000 LOWE'S BOULEVARD			3. Date of Earliest Transaction (Month/Day/Year) 09/30/2016			(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) <u>below</u>)			
(Street) MOORESVILLE, NC 28117			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City) (S	State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	dly Owned
	isaction Date h/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder: Report on a	a separate line	for each cla	ass of sect	urities benet	Perso inforn requir	ns who rest nation cont ed to respo lys a curren	or indirectly. pond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or		

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	Derivative Security			Disposed of (D) (Instr. 3, 4, and 5)							
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock (1)	<u>(2)</u>	09/30/2016	А		346.212		(2)	(2)	Common Stock	346.212	

Reporting Owners

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Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WISEMAN ERIC C 1000 LOWE'S BOULEVARD	Х						
MOORESVILLE, NC 28117 Signatures							
orginalaroo							

By: /s/ Sandra Felton by power of attorney For: Eric C. 10/04/2016 Wiseman

**Signature of Reporting Person

Date

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 credit of deferred compensation to the Reporting Person's deferred stock account under the Issuer's Directors' Deferred (1) Compensation Plan.
- Each share of phantom stock is the economic equivalent of one share of common stock. The Reporting Person becomes entitled to the (2)cash value of the phantom stock upon ceasing to be a director of the Issuer.
- Includes the credit of dividends to the Reporting Person's deferred stock account under the Issuer's Directors' Deferred Compensation (3) Plan.

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.