

INTERNATIONAL BUSINESS MACHINES CORP
Form SC 13G/A
February 14, 2014

SECURITIES AND EXCHANGE COMMISSION

Washington, DC 20549

SCHEDULE 13G

(Rule 13d-102)

**INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT
TO § 240.13d-1(b), (c) AND (d) AND AMENDMENTS THERETO FILED**

PURSUANT TO § 240.13d-2

(Amendment No. 2)*

International Business Machines Corporation

(Name of Issuer)

COMMON STOCK

(Title of Class of Securities)

459200101

(CUSIP Number)

December 31, 2013

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

Rule 13d-1 (b)

Rule 13d-1 (c)

Rule 13d-1 (d)

* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page. The information required on the remainder of this cover page shall not be deemed to be filed for the purpose of Section 18 of the Securities Exchange Act of 1934 (the Act) or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes.)

CUSIP No. 459200101

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Page 2 of 21 Pages

1 NAME OF REPORTING PERSONS

Warren E. Buffett

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

United States Citizen

5 SOLE VOTING POWER

NUMBER OF

SHARES 9,000
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 68,121,984
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON 9,000
8 SHARED DISPOSITIVE POWER
WITH

68,121,984
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

68,130,984
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not Applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 6.3%
TYPE OF REPORTING PERSON*

IN

CUSIP No. 459200101

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1 NAME OF REPORTING PERSONS

Berkshire Hathaway Inc.

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Delaware

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 68,121,984
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

68,121,984
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

68,121,984
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 6.3%
TYPE OF REPORTING PERSON*

HC, CO

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1 NAME OF REPORTING PERSONS

National Indemnity Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 67,439,916
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

67,439,916
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

67,439,916
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 6.2%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

Berkshire Hathaway Assurance Corporation

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 506,000
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

506,000
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

506,000
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

Columbia Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 597,588
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

597,588
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

597,588
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

CUSIP No. 459200101

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1 NAME OF REPORTING PERSONS

Central States of Omaha Companies, Inc.

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 84,480
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

84,480
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

84,480
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

HC, CO

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Page 8 of 21 Pages

1 NAME OF REPORTING PERSONS

Central States Indemnity Company of Omaha

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 79,200
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

79,200
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

79,200
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

CSI Life Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 5,280
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

5,280
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

5,280
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

Finial Reinsurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Connecticut

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 353,000
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

353,000
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

353,000
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

National Indemnity Company of the South

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Florida

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 103,000
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

103,000
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

103,000
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

Boat America Corporation

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Virginia

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 34,000
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

34,000
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

34,000
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

HC, CO

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1 NAME OF REPORTING PERSONS

Seaworthy Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Maryland

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 34,000
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

34,000
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

34,000
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

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1 NAME OF REPORTING PERSONS

GEICO Advantage Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 58,700
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

58,700
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

58,700
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

GEICO Casualty Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Maryland

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 298,300
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

298,300
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

298,300
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

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1 NAME OF REPORTING PERSONS

GEICO Choice Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 58,900
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

58,900
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

58,900
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

CUSIP No. 459200101

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1 NAME OF REPORTING PERSONS

Berkshire Hathaway Specialty Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 3,171,337
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

3,171,337
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

3,171,337
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

11 Not applicable.
PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 0.3%
TYPE OF REPORTING PERSON*

IC, CO

CUSIP No. 459200101

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1 NAME OF REPORTING PERSONS

GEICO Secure Insurance Company

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) (b)

3 SEC USE ONLY

4 CITIZENSHIP OR PLACE OF ORGANIZATION

State of Nebraska

5 SOLE VOTING POWER

NUMBER OF

SHARES NONE
6 SHARED VOTING POWER

BENEFICIALLY

OWNED BY 58,900
EACH **7 SOLE DISPOSITIVE POWER**

REPORTING

PERSON NONE
8 SHARED DISPOSITIVE POWER
WITH

58,900
9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

58,900
10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

Not applicable.
11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

12 Less than 0.1%
TYPE OF REPORTING PERSON*

IC, CO

SCHEDULE 13G

Item 1.

(a) Name of Issuer:

International Business Machines Corporation

(b) Address of Issuer's Principal Executive Offices:

1 New Orchard Road, Armonk, NY 10504

Item 2(a). Name of Person Filing:

Item 2(b). Address of Principal Business Office:

Item 2(c). Citizenship:

Warren E. Buffett	Columbia Insurance Company 3024 Harney Street	Finial Reinsurance Company	GEICO Advantage Insurance Company
3555 Farnam Street	Omaha, Nebraska 68131	100 Stamford Plaza	5260 Western Avenue
Omaha, Nebraska 68131	Nebraska corporation	Stamford, Connecticut 06962	Chevy Chase, Maryland 20815
United States Citizen		Connecticut corporation	Nebraska corporation
Berkshire Hathaway Inc.	Central States of Omaha Companies, Inc.	National Indemnity Company of the South	GEICO Casualty Company
3555 Farnam Street	1212 North 96th Street Omaha, Nebraska 68114	3024 Harney Street	5260 Western Avenue
Omaha, Nebraska 68131	Nebraska corporation	Omaha, Nebraska 68131	Chevy Chase, Maryland 20815
Delaware corporation		Florida corporation	Maryland corporation
National Indemnity Company	Central States Indemnity Company of Omaha	Boat America Corporation	GEICO Choice Insurance Company
3024 Harney Street	1212 North 96th Street	880 South Pickett Street	5260 Western Avenue
Omaha, Nebraska 68131	Omaha, Nebraska 68114	Alexandria, Virginia 22304	Chevy Chase, Maryland 20815
Nebraska corporation	Nebraska corporation	Virginia corporation	Nebraska corporation
Berkshire Hathaway	CSI Life Insurance Company	Seaworthy Insurance Company	GEICO Secure Insurance Company
Assurance Corporation	1212 North 96th Street Omaha,	880 South Pickett Street	

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3024 Harney Street	Nebraska 68114	Alexandria, Virginia 22304	5260 Western Avenue Chevy Chase, Maryland 20815
Omaha, Nebraska 68131	Nebraska corporation	Maryland corporation	Nebraska corporation

Nebraska corporation

Berkshire Hathaway Specialty
Insurance Company

3024 Harney Street

Omaha, Nebraska 68131

Nebraska corporation

(d) Title of Class of Securities:

Common Stock

(e) CUSIP Number:

459200101

Item 3. If this statement is filed pursuant to §§240.13d-1(b), or 240.13d-2(b) or (c), check whether the person filing is a:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.), Berkshire Hathaway Inc., Central States of Omaha Companies, Inc. and Boat America Corporation are each a Parent Holding Company or Control Person, in accordance with §240.13d-1(b)(1)(ii)(G).

National Indemnity Company, Berkshire Hathaway Assurance Corporation, Berkshire Hathaway Specialty Insurance Company, Columbia Insurance Company, Central States Indemnity Company of Omaha, CSI Life Insurance Company, Finial Reinsurance Company, National Indemnity Company of the South, Seaworthy Insurance Company, GEICO Advantage Insurance Company, GEICO Casualty Company, GEICO Choice Insurance Company and GEICO Secure Insurance Company are each an Insurance Company as defined in section 3(a)(19) of the Act.

The Reporting Persons together are a Group in accordance with §240.13d-1(b)(1)(ii)(K).

Item 4. Ownership.

Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

(a) Amount beneficially owned:

See the Cover Pages for each of the Reporting Persons.

(b) Percent of class:

See the Cover Pages for each of the Reporting Persons.

(c) Number of shares as to which such person has:

(i) sole power to vote or to direct the vote

(ii) shared power to vote or to direct the vote

(iii) sole power to dispose or to direct the disposition of

(iv) shared power to dispose or to direct the disposition of

See the Cover Pages for each of the Reporting Persons.

Item 5. Ownership of Five Percent or Less of a Class.

Not Applicable.

Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not Applicable.

Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company or Control Person.

See Exhibit A.

Item 8. Identification and Classification of Members of the Group.

See Exhibit A.

Item 9. Notice of Dissolution of Group.

Not Applicable.

Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under §240.14a-11.

SIGNATURES

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

February 14, 2014
Date

/s/ Warren E. Buffett
Signature

Warren E. Buffett
Name

Berkshire Hathaway Inc.

By: /s/ Warren E. Buffett
Signature

Warren E. Buffett, Chairman of the Board
Name/Title

February 14, 2014
Date

Berkshire Hathaway Assurance Corporation
Columbia Insurance Company
Central States Indemnity Company of Omaha
CSI Life Insurance Company
Finial Reinsurance Company
National Indemnity Company
National Indemnity Company of the South
Seaworthy Insurance Company
GEICO Advantage Insurance Company
GEICO Casualty Company
GEICO Choice Insurance Company
GEICO Secure Insurance Company
Central States of Omaha Companies, Inc.
Boat America Corporation

Berkshire Hathaway Specialty Insurance Company

By: /s/ Warren E. Buffett
Signature

Warren E. Buffett
Attorney-in-Fact

Name/Title

February 14, 2014
Date

SCHEDULE 13G

EXHIBIT A

RELEVANT SUBSIDIARIES AND MEMBERS OF FILING GROUP

PARENT HOLDING COMPANIES OR CONTROL PERSONS:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.)

Berkshire Hathaway Inc.

Central States of Omaha Companies, Inc.

Boat America Corporation

INSURANCE COMPANIES AS DEFINED IN SECTION 3(a)(19) OF THE ACT:

National Indemnity Company, Berkshire Hathaway Assurance Corporation, Berkshire Hathaway Specialty Insurance Company, Columbia Insurance Company, Central States Indemnity Company of Omaha, CSI Life Insurance Company, Finial Reinsurance Company, National Indemnity Company of the South, Seaworthy Insurance Company, GEICO Advantage Insurance Company, GEICO Casualty Company, GEICO Choice Insurance Company and GEICO Secure Insurance Company

SCHEDULE 13G

EXHIBIT B

JOINT FILING AGREEMENT PURSUANT TO RULE 13d-1(k)(1)

AND POWER OF ATTORNEY

The undersigned persons agree and consent to the joint filing on their behalf of Schedule 13G and all amendments thereto in connection with their beneficial ownership of the Common Stock of International Business Machines Corporation.

Each person other than Warren E. Buffett whose signature appears below hereby constitutes and appoints Warren E. Buffett as his true and lawful attorney-in-fact and agent with full power of substitution and resubstitution, to act for him and in his name, place and stead, in any and all capacities, to sign a Schedule 13G and any or all amendments to Schedule 13G in connection with the beneficial ownership of the Common Stock of International Business Machines Corporation, and to file the same, with all exhibits thereto, and other documents in connection therewith, with the Securities and Exchange Commission, granting unto said attorney-in-fact and agent full power and authority to do and perform each and every act and thing requisite and necessary to be done in and about the premises, as fully to all intents and purposes as he might or could do in person, hereby ratifying and confirming all that said attorney-in-fact and agent or his substitute may lawfully do or cause to be done by virtue hereof.

Dated: February 14, 2014

/S/ Warren E. Buffett
Warren E. Buffett

Berkshire Hathaway Inc.

Dated: February 14, 2014

/S/ Warren E. Buffett
By: Warren E. Buffett
Title: Chairman of the Board

National Indemnity Company

Dated: February 14, 2014

/S/ Dale D. Geistkemper
By: Dale D. Geistkemper
Title: Treasurer

Berkshire Hathaway Assurance Corporation

Dated: February 14, 2014

/S/ Dale D. Geistkemper
By: Dale D. Geistkemper
Title: Treasurer

Columbia Insurance Company

Dated: February 14, 2014

/S/ Dale D. Geistkemper
By: Dale D. Geistkemper
Title: Treasurer

Dated: February 14, 2014

Central States of Omaha Companies, Inc.

/S/ Thomas B. Schlichting
By: Thomas B. Schlichting
Title: CFO

Dated: February 14, 2014

CSI Life Insurance Company

/S/ Thomas B. Schlichting
By: Thomas B. Schlichting
Title: CFO

Dated: February 14, 2014

Central States Indemnity Company of Omaha

/S/ Thomas B. Schlichting
By: Thomas B. Schlichting
Title: CFO

Dated: February 14, 2014

Finial Reinsurance Company

/S/ Dale D. Geistkemper
By: Dale D. Geistkemper
Title: Treasurer

Dated: February 14, 2014

National Indemnity Company of the South

/S/ Dale D. Geistkemper
By: Dale D. Geistkemper
Title: Treasurer

Dated: February 14, 2014

Boat America Corporation

/S/ William M. Oakerson
By: William M. Oakerson
Title: Chairman

Dated: February 14, 2014	Seaworthy Insurance Company /S/ William M. Oakerson By: William M. Oakerson Title: Chairman
Dated: February 14, 2014	GEICO Advantage Insurance Company /S/ Charles G. Schara By: Charles G. Schara Title: Treasurer
Dated: February 14, 2014	GEICO Casualty Company /S/ Charles G. Schara By: Charles G. Schara Title: Treasurer
Dated: February 14, 2014	GEICO Choice Insurance Company /S/ Charles G. Schara By: Charles G. Schara Title: Treasurer
Dated: February 14, 2014	GEICO Secure Insurance Company /S/ Charles G. Schara By: Charles G. Schara Title: Treasurer
Dated: February 14, 2014	Berkshire Hathaway Specialty Insurance Company /S/ Dale D. Geistkemper By: Dale D. Geistkemper Title: Treasurer