## Edgar Filing: Frieson Donald - Form 4

| Frieson Dona                   | ald                 |               |                                |   |             |           |                  |   |                 |                         |  |
|--------------------------------|---------------------|---------------|--------------------------------|---|-------------|-----------|------------------|---|-----------------|-------------------------|--|
| Form 4                         |                     |               |                                |   |             |           |                  |   |                 |                         |  |
| April 03, 201                  | 19                  |               |                                |   |             |           |                  |   |                 |                         |  |
| FORM                           | 14                  |               |                                |   |             |           |                  |   | -               | PPROVAL                 |  |
|                                | UNITED              | STATES        |                                | ITIES A<br>hington,                                   |             |           | NGE              | COMMISSION                                | OMB<br>Number:  | 3235-0287               |  |
| Check this box<br>if no longer |                     |               |                                |   |             |           |                  |   | Expires:        | January 31,             |  |
| subject to                     | STATEN              | IENT O        | F CHAN                         | GES IN I  | BENEFI      | CIA       | LOW              | <b>NERSHIP OF</b>                         | Estimated       | 2005<br>average         |  |
| Section 1                      | 5. SECURITIES       |               |                                |   |             |           | burden hours per |   |                 |                         |  |
| Form 4 or                      |                     |               |                                |   |             |           |                  |   | response        | •                       |  |
| Form 5<br>obligation           | <b>.</b>            |               |                                |   |             |           |                  | ge Act of 1934,                           |                 |                         |  |
| may cont                       |                     |               |                                | •   | •           | - ·       |                  | of 1935 or Sectio                         | n               |                         |  |
| See Instru                     |                     | 30(h)         | of the Inv                     | vestment  | Compan      | y Act     | of 19            | 40  |                 |                         |  |
| 1(b).                          |                     |               |                                |   |             |           |                  |   |                 |                         |  |
| (Print or Type F               | Responses)          |               |                                |   |             |           |                  |   |                 |                         |  |
| (I fine of Type I              | (csponses)          |               |                                |   |             |           |                  |   |                 |                         |  |
| 1. Name and A                  | ddress of Reporting | Person *      | 2 Issuer                       | Name and  | Ticker or ' | Fradin    | σ                | 5. Relationship of                        | Reporting Per   | son(s) to               |  |
| <b>F</b> ' <b>D</b> 11         |                     |               |                                | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol |             |           |                  | Issuer                                    |                 |                         |  |
|                                |                     |               | LOWES COMPANIES INC [LOW]      |   |             |           | OW1              |   |                 |                         |  |
| (Lest)                         | (First) (N          | /liddle)      |                                |   |             | [2        |                  | (Chec                                     | k all applicabl | e)                      |  |
| (Last)                         | (First) (N          | (ildule)      |                                | Earliest Tr   | ansaction   |           |                  | Director                                  | 109             | 6 Owner                 |  |
| 1000 LOWES BOULEVARD           |                     |               | (Month/Day/Year)<br>04/01/2019 |   |             |           |                  | Director<br>X Officer (give               | title 10% Owner |                         |  |
|                                |                     |               | 01/01/20                       | ,1,2  |             |           |                  | below)                                    | below)          |                         |  |
|                                |                     |               |                                |   |             |           |                  |   | , Supply Chair  |                         |  |
|                                |                     |               |                                | 4. If Amendment, Date Original                        |             |           |                  | 6. Individual or Joint/Group Filing(Check |                 |                         |  |
|                                |                     |               | Filed(Mon                      | th/Day/Year   | )           |           |                  | Applicable Line)<br>_X_ Form filed by (   | One Reporting P | erson                   |  |
| MOORESV                        | TILLE, NC 28117     |               |                                |   |             |           |                  | Form filed by N                           |                 |                         |  |
| MOORLSV                        | ILLL, INC 20117     |               |                                |   |             |           |                  | Person                                    |                 |                         |  |
| (City)                         | (State)             | (Zip)         | Table                          | e I - Non-D   | erivative S | Securi    | ties Ac          | quired, Disposed of                       | f, or Beneficia | lly Owned               |  |
| 1.Title of                     | 2. Transaction Date | e 2A. Dee     | emed                           | 3.  | 4. Securi   | ties      |                  | 5. Amount of                              | 6. Ownership    | 7. Nature of            |  |
| Security                       | (Month/Day/Year)    | Executi       | on Date, if                    |   | onAcquired  |           |                  |   | Form: Direct    | Indirect                |  |
| (Instr. 3)                     |                     | any<br>(Month | /Day/Year)                     | CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)      |             |           |                  | 2   |                 | Beneficial<br>Ownership |  |
|                                |                     | (INIOIIUI)    | (Day/Teal)                     | (11150. 0)  | (111501.5,  | 4 anu     | 5)               |   | (Instr. 4)      | (Instr. 4)              |  |
|                                |                     |               |                                |   |             | (A)       |                  | Reported                                  |                 |                         |  |
|                                |                     |               |                                |   |             | (A)<br>or |                  | Transaction(s)                            |                 |                         |  |
|                                |                     |               |                                | Code V  | Amount      | (D)       | Price            | (Instr. 3 and 4)                          |                 |                         |  |
| Common                         | 04/01/2019          |               |                                | А   | 4,230       | А         | \$0              | 8,950                                     | D               |                         |  |
| Stock                          | 01/01/2017          |               |                                | А   | (1)         | Л         | ψυ               | 0,750                                     | D               |                         |  |

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)

**Reporting Owners** 

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4. 5. Number of<br>TransactiorDerivative<br>Code Securities<br>(Instr. 8) Acquired (A)<br>or Disposed of<br>(D) |                                    | 6. Date Exer<br>Expiration D<br>(Month/Day/ | ate                | 7. Title and A<br>Underlying S<br>(Instr. 3 and | Securit                   |
|---|---|---|---|---|------------------------------------|---|--------------------|---|---------------------------|
|   | Security  |   |   | Code V  | (Instr. 3, 4,<br>and 5)<br>(A) (D) | Date<br>Exercisable                         | Expiration<br>Date | Title   | Amo<br>or<br>Num<br>of Sh |
| Non-Qualified<br>Stock Option<br>(right to buy)     | \$ 108.93   | 04/01/2019                              |   | А   | 18,570                             | (2)   | 04/01/2029         | Common<br>Stock                                 | 18,5                      |

# **Reporting Owners**

| Reporting Owner Name / Address                                  | Relationships |           |                   |       |  |  |  |
|---|---------------|-----------|-------------------|-------|--|--|--|
|   | Director      | 10% Owner | Officer           | Other |  |  |  |
| Frieson Donald<br>1000 LOWES BOULEVARD<br>MOORESVILLE, NC 28117 |               |           | EVP, Supply Chain |       |  |  |  |
| Signatures  |               |           |                   |       |  |  |  |

| By: /s/ Sandra Felton by power of attorney for: Donald E. |            |  |  |  |  |
|---|------------|--|--|--|--|
| Frieson   | 04/03/2019 |  |  |  |  |
| <u>**</u> 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).

(1) Restricted stock granted pursuant to 2006 Long-Term Incentive Plan. The shares will fully vest on April 1, 2022.

(2) The option vests in three annual installments beginning on April 1, 2020.

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.