

2010 JAN 14 AM 9:56

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Loews Corporation Public Affairs Committee

667 Madison Avenue

ADDRESS (number and street)

Check if different than previously reported. (ACC)

New York N.Y. 10065

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00416495

3. IS THIS REPORT NEW OR AMENDED
X (N) (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- X January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	X Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)	General (12G)	Runoff (12R)
Convention (12C)	Special (12S)	

Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

General (30G)	Runoff (30R)	Special (30S)
---------------	--------------	---------------

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 012009 through 12312009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John J. Kenny

Signature of Treasurer

Date 0104 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

10030213180

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Report Covering the Period: From: ^M0 ^M7 / ^D0 ^D1 / ^Y2 ^Y0 ^Y0 ^Y9 To: ^M1 ^M2 / ^D3 ^D1 / ^Y2 ^Y0 ^Y0 ^Y9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand ^Y ^Y ^Y ^Y January 1, 2 0 0 9		5,000.00
(b) Cash on Hand at Beginning of Reporting Period.....	5,000.00	
(c) Total Receipts (from Line 19).....	1,500.00	1,500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2,000.00	2,000.00
7. Total Disbursements (from Line 31).....	1,062.00	1,062.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	938.00	938.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	-	-
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	-	-

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

10030213181

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From: M M / D D / Y Y Y Y To: M M / D D / Y Y Y Y

10030213182

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1 5' 0 0 0 0 0	1 5' 0 0 0 0 0
(ii) Unitemized	,	,
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	,	,
(b) Political Party Committees	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1 5' 0 0 0 0 0	1 5' 0 0 0 0 0
12. Transfers From Affiliated/Other Party Committees.....	,	,
13. All Loans Received	,	,
14. Loan Repayments Received.....	,	,
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	,	,
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	,	,
17. Other Federal Receipts (Dividends, Interest, etc.).....	,	,
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	,	,
(b) Levin Funds (from Schedule H5).....	,	,
(c) Total Transfers (add 18(a) and 18(b))..	,	,
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1 5' 0 0 0 0 0	1 5' 0 0 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1 5' 0 0 0 0 0	1 5' 0 0 0 0 0

DETAILED SUMMARY PAGE
of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	, , .	, , .
(ii) Non-Federal Share.....	, , .	, , .
(b) Other Federal Operating Expenditures	, , .	, , .
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	, , .	, , .
22. Transfers to Affiliated/Other Party Committees.....	, , .	, , .
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	, 1 0 6 2 0 0 0	, 1 0 6 2 0 0 0
24. Independent Expenditures (use Schedule E)	, , .	, , .
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	, , .	, , .
26. Loan Repayments Made.....	, , .	, , .
27. Loans Made.....	, , .	, , .
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	, , .	, , .
(b) Political Party Committees	, , .	, , .
(c) Other Political Committees (such as PACs).....	, , .	, , .
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	, , .	, , .
29. Other Disbursements	, , .	, , .
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	, , .	, , .
(ii) "Levin" Share	, , .	, , .
(b) Federal Election Activity Paid Entirely With Federal Funds	, , .	, , .
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	, , .	, , .
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	, 1 0 6 2 0 0 0	, 1 0 6 2 0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	, 1 0 6 2 0 0 0	, 1 0 6 2 0 0 0

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DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	, 1 5 0 0 0 0 0	, 1 5, 0 0 0 0 0
34. Total Contribution Refunds (from Line 28(d))	, , .	, , .
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 1 5 0 0 0 0 0	, 1 5, 0 0 0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	, , -	, , -
37. Offsets to Operating Expenditures (from Line 15, page 3)	, , -	, , -
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, , -	, , -

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**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE	OF
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Loews Corporation Public Affairs Committee

Full Name (Last, First, Middle Initial) A. Tisch James S.		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9
Mailing Address 667 Madison Avenue		Amount of Each Receipt this Period 5 0 0 0 0 0
City New York,	State Zip Code NY 10065-8087	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5 0 0 0 0 0
Name of Employer Loews Corporation	Occupation President: Chief Exec Off	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5 0 0 0 0 0	

Full Name (Last, First, Middle Initial) B. Tisch Andrew H.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 9
Mailing Address 667 Madison Avenue		Amount of Each Receipt this Period 5 0 0 0 0 0
City New York	State Zip Code NY 10065-8087	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5 0 0 0 0 0
Name of Employer Loews Corporation	Occupation Co-Chairman of Board Chairmen Exec Committee	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5 0 0 0 0 0	

Full Name (Last, First, Middle Initial) C. Tisch Jonathan M.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 0 9
Mailing Address 667 Madison Avenue		Amount of Each Receipt this Period 5 0 0 0 0 0
City New York	State Zip Code NY 10065-8087	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5 0 0 0 0 0
Name of Employer Loews Corporation	Occupation Co-Chairman of Board CEO Loews Hotels, Inc.	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5 0 0 0 0 0	

SUBTOTAL of Receipts This Page (optional).....	1 5 0 0 0 0 0
TOTAL This Period (last page this line number only).....	1 5 0 0 0 0 0

10030213185

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 3

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Loews Corporation Public Affairs Committee

Full Name (Last, First, Middle Initial)

A. Corkerfor Senate

Mailing Address

PO Box 848

City

Chattanooga,

State

TN

Zip Code

37401

Purpose of Disbursement

Robert Corker

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State: **TN**

District:

Date of Disbursement

M M / D D / Y Y Y Y
1 0 0 2 / 2 0 0 9

Amount of Each Disbursement this Period

: **2 0 0 0 0 0**

Full Name (Last, First, Middle Initial)

B. Coburn for Senate

Mailing Address

217 Third Street, SE

City

Washington,

State

DC

Zip Code

20003

Purpose of Disbursement

Thomas Coburn

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Amount of Each Disbursement this Period

: **2 0 0 0 0 0**

Full Name (Last, First, Middle Initial)

C. Senator Dorgan

Mailing Address

420 C Street NE

City

Washington

State

DC

Zip Code

20002

Purpose of Disbursement

Byran Dorgan

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 9

Amount of Each Disbursement this Period

: **2 5 0 0 0 0**

SUBTOTAL of Disbursements This Page (optional).....

: **6 5 0 0 0 0**

TOTAL This Period (last page this line number only).....

: **6 5 0 0 0 0**

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 3

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Loews Corporation Public Affairs Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Georgians for Isakson Mailing Address PO Box 250116		M M / D D / Y Y Y Y 10 29 / 2009	
City State Zip Code Atlanta GA 30325		Amount of Each Disbursement this Period 1.000000	
Purpose of Disbursement Johnny Isakson Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

B. Friends of Kelly Ayotte Mailing Address PO Box 7272		M M / D D / Y Y Y Y 11 10 / 2009	
City State Zip Code Alexandria, VA 22307-0272		Amount of Each Disbursement this Period 1.000000	
Purpose of Disbursement Kelly Ayotte Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

C. Friends of John Boehner Mailing Address 104 Hume Avenue		M M / D D / Y Y Y Y 11 16 / 2009	
City State Zip Code Alexandria, VA 22301		Amount of Each Disbursement this Period 6000	
Purpose of Disbursement John Boehner Candidate Name		Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 8th		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)..... 2.060000

TOTAL This Period (last page this line number only).....

10030213187

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 3

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Loews Corporation Public Affairs Committee

Full Name (Last, First, Middle Initial)

A. Friends of John Boehner

Mailing Address
104 Hume Avenue

City **Alexandria** State **VA** Zip Code **22301**

Purpose of Disbursement
John Boehner

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: **OH** District: **8th**

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

6 0 0 0

Full Name (Last, First, Middle Initial)

B. Senate Majority Fund

Mailing Address
507 Capital Court NE

City **Washington** State **DC** Zip Code **20002**

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 0 9

Amount of Each Disbursement this Period

1 0 0 0 0 0

Full Name (Last, First, Middle Initial)

C. Friends of John Boehner

Mailing Address
104 Hume Avenue

City **Alexandria** State **VA** Zip Code **22301**

Purpose of Disbursement
John Boehner

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: **OH** District: **8th**

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 0 9

Amount of Each Disbursement this Period

1 0 0 0 0 0

SUBTOTAL of Disbursements This Page (optional)..... **2,000.00**

TOTAL This Period (last page this line number only)..... **1,062.00**

10030213188

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

10030213189

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>DHL</i>	Shipping Date <i>1-13-10</i>
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Amel</i> PREPARER	<i>1/14/10</i> DATE PREPARED