## Edgar Filing: CNA FINANCIAL CORP - Form 4

Form 4	NCIAL CORP										
March 17, 2		UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 30(h) of the Investment Company Act of 1940									
Check th if no lon subject t Section Form 4 of Form 5 obligation may con <i>See</i> Instr 1(b).	ger o 16. or Filed pu ons tinue. Section 12										
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> HERMAN MARK			2. Issuer Name and Ticker or Trading Symbol CNA FINANCIAL CORP [CNA]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 333 S. WA	(First) BASH AVE.	(Middle)	3. Date o (Month/I 03/13/2	-	ransaction			Director X Officer (give below)	10%	Owner r (specify	
CHICAGO				endment, Da nth/Day/Year	ate Original r)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
								Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative S	Securi	ties Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securiti or(A) or Dis (Instr. 3, 4	sposed	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)	
Common Stock (1)	03/13/2015			Code V A	Amount 19,550	(D) A	Price \$ 40.84	(insu: 5 and 4) 19,550	D		
Common Stock	03/13/2015			F <u>(2)</u>	8,934	D	\$ 40.84	10,616	D		

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

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

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

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. Transacti Code (Instr. 8)	5. iorNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration I (Month/Day e			e and int of lying ities 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
HERMAN MARK 333 S. WABASH AVE. CHICAGO, IL 60604			President & COO, CNA Specialty				
Signatures							
/s/ Stathy Darcy by Power of A Herman	ttorney fo	or Mark I.	03/16/2015				

\*\*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).

The Company's Incentive Compensation Plan (as amended as of January 1, 2010) provides for the issuance of CNA Financial
 (1) Corporation's common stock under the Long-Term Incentive Plan based upon achievement of predetermined financial goals over a three year period. For 2012-2014 performance period, Mr. Herman was awarded 19,550 shares of CNA Financial Corporation's common stock.

Date

(2) The Company's Incentive Compensation Plan (as amended as of January 1, 2010) permits the withholding of shares of common stock to satisfy tax withholding obligations of the participants.

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.