## Edgar Filing: LOWES COMPANIES INC - Form 4

LOWES CO	MPANIES IN	C										
Form 4												
December 0	9, 2005											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								r	OMB APPROVAL			
	UNITE	DSTATE						NGE (	COMMISSION	ONIB	3235-0287	
Check th	is box		was	ningto	)n, 1	D.C. 205	949			Number:	January 31,	
if no long		EMENT O	F CHAN	CES I	NF	RENEFI	CIAI		NERSHIP OF	Expires.		
subject to Section 1	0				GES IN BENEFICIAL OW					Estimated	•	
Form 4 c				SECONTIES						burden hou response	•	
Form 5		oursuant to	Section 10	5(a) of	the	Securiti	es Ey	cchang	ge Act of 1934,	16300136	. 0.0	
obligatio	ns Section	•						-	f 1935 or Sectio	n		
may cont See Instr	unue.		) of the Inv	•		•	- ·					
1(b).	detion											
(Print or Type l	Responses)											
1 Name and A	Address of Report	ing Derson *	2.1			<b>T</b> . 1 <b>r</b>	<b>F</b> 1'		5 Delationship of	f Deporting Der	ron(s) to	
STEED JOI	-			Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer			
Symbol				S COMPANIES INC [LOW]								
<i></i>							ic [L	. <b>U</b> w ]	(Chec	ck all applicabl	e)	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction						D. (	100		
1000 I OW	E'S BOULEVA	ARD	(Month/D 12/08/20	-	)				Director X Officer (give		% Owner her (specify	
1000 LO WI	L'S DOULL VI		12/08/20	005					below)	below)		
									SVP/Genera	al Merchandise	Manage	
(Street) 4. If Amer				Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Y	(ear)				Applicable Line)	0 D ( D		
MOODEGU		17							_X_ Form filed by Form filed by N	One Reporting Polore than One R		
MOORESV	ILLE, NC 281	11/							Person		1 0	
(City)	(State)	(Zip)	Table	e I - Noi	n-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction	Date 2A. De	emed	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Y							Securities	Form: Direct			
(Instr. 3) any (Month/Day/Y			Doy/Voor)	Code	8)	Disposed			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(Ivioiiui	/Day/Teal)	(msu.	8)	(11180. 5,	4 anu	5)	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported		· ·	
							or		Transaction(s)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	12/08/2005			G	V	1,500	D	\$0	11,432	D		
Stock	12,00,2000			0		1,000	_	ΨŪ				
Common Stock	12/08/2005			G	V	1,500	A	\$0	1,902	Ι	by Trust	

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.

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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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
STEED JOHN DAVID 1000 LOWE'S BOULEVARD MOORESVILLE, NC 28117			SVP/General Merchandise Manage				
Signatures							
By: Sandra Felton For: John D. Steed		12/09/200	15				

Date

## \*\*Signature of Reporting Person D 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).

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.