TRAVELERS COMPANIES, INC.

Form 4

November 06, 2015

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FORM	ПΔ						OMB AP	PROVAL	
Washington, D.C. 20549								3235-0287	
if no lon	Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF						Expires:	January 31, 2005	
Section	Section 16. SECURITIES							verage s per	
Form 4 Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							0.5	
obligatio				` '	C	·			
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1(b).									
(Print or Type	Responses)								
1. Name and A	Person *	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer				
			TRAV [TRV]		COMPANIES, INC.	(Check all applicable)			
(Last)	(First) ((Middle)		of Earliest ' 'Day/Year)	Transaction	DirectorX Officer (give	title Other	Owner r (specify	
THE TRAV	ANIES,	11/04/2	•		below) below) President & COO				
INC., 385 V	WASHINGTON	STREET				1100			
	(Street)		4. If Am	nendment, I	Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Mo	onth/Day/Ye	ear)	Applicable Line)			
ST. PAUL,	MN 55102					_X_ Form filed by O Form filed by Mo Person			
(City)	(State)	(Zip)	Tal	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired (A) 5. Amoun Transactionr Disposed of (D) Securities Code (Instr. 3, 4 and 5) Beneficial			6. Ownership Form:	7. Nature of Indirect Beneficial	

•		- I au	ne 1 - 14011-	Derivative	Secu	riues Acqui	ieu, Disposeu oi,	or beneficially	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			(D)	Beneficially Form: Owned Direct (D Following or Indirect	Ownership	Beneficial Ownership
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	11/04/2015		M	40,000	A	\$ 52.76	130,399.138	D	
Common Stock	11/04/2015		S	40,000	D	\$ 113.547 (1)	90,399.138	D	
Common Stock							619.399	I	401(k) Plan

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 (9-02)

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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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 52.76	11/04/2015		M	40,000	02/06/2010	02/06/2017	Common Stock	40,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MACLEAN BRIAN W THE TRAVELERS COMPANIES, INC. 385 WASHINGTON STREET ST. PAUL. MN 55102

President & COO

Signatures

/s/Wendy C. Skjerven, by power of attorney

11/06/2015

**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).
- Represents the weighted average sales price for price increments ranging from \$113.18 to \$113.83. The Reporting Person undertakes to (1) provide, upon request by the Securities and Exchange Commission staff, the Issuer or a security holder of the Issuer, full information regarding the number of shares sold at each separate price for all transactions reported on this Form 4.

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.

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