

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>BERKSHIRE HATHAWAY INC</u> (Last) (First) (Middle) <u>3555 FARNAM STREET</u> (Street) <u>OMAHA NE 68131</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>11/08/2019</u>	3. Issuer Name and Ticker or Trading Symbol <u>SOUTHWEST AIRLINES CO [LUV]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	53,649,213	I	See footnotes ⁽¹⁾⁽²⁾⁽³⁾

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* <u>BERKSHIRE HATHAWAY INC</u> (Last) (First) (Middle) <u>3555 FARNAM STREET</u> (Street) <u>OMAHA NE 68131</u> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>BUFFETT WARREN E</u> (Last) (First) (Middle) <u>3555 FARNAM STREET</u> (Street) <u>OMAHA NE 68131</u> (City) (State) (Zip)

Explanation of Responses:

- 46,962,713 of the total reported securities are owned directly by the following subsidiaries of Berkshire Hathaway Inc. ("Berkshire"): Government Employees Insurance Company (1,034,747), Medical Protective Company (8,722) and National Indemnity Company (45,649,244). In order to avoid double counting, shares of Common Stock reported as being owned by each of these subsidiaries only reflect shares that are owned directly by such subsidiary, and do not reflect any shares that such subsidiary may be deemed to beneficially own by virtue of ownership or control of any other subsidiary otherwise reported in this Form 3.
- Continued from footnote 1: As Berkshire is in the chain of ownership of each subsidiary listed above, it may be deemed presently to both beneficially own and have a pecuniary interest in all shares of Common Stock presently directly owned by such subsidiaries. Warren E. Buffett, as the controlling stockholder of Berkshire, may be deemed presently to beneficially own, but only to the extent he has a pecuniary interest in, the shares of Common Stock presently owned by each of these subsidiaries. Mr. Buffett disclaims beneficial ownership of these reported securities except to the extent of his pecuniary interest therein.
- 6,956,500 of the total reported securities are owned directly by the following pension plans of Berkshire's subsidiaries: Berkshire Hathaway Consolidated Pension Plan Master Retirement Trust (6,700,000), Buffalo News Driver/Distributors Pension Plan (6,500), and Precision CastParts Corp Master Trust (250,000). Each of Berkshire, Mr. Buffett and these pension plans disclaim beneficial ownership in such shares.

Remarks:

/s/ Warren E. Buffett, on behalf of himself and each other reporting person hereunder 11/12/2019

** Signature of Reporting Person Date

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

* If the form is filed by more than one reporting person, see Instruction 5 (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.

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 Number.