

Poloway Jeffrey D
 Form 3
 February 17, 2009

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Poloway Jeffrey D</p> <p>(Last) (First) (Middle)</p> <p>414 UNION STREET, SUITE 2000</p> <p>(Street)</p> <p>NASHVILLE, TN 37219</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>02/13/2009</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>LOUISIANA-PACIFIC CORP [LPX]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input checked="" type="checkbox"/> Other (give title below) (specify below) Corporate Controller</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	---	--	---	---	--

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	10,651 ⁽¹⁾	D	

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

SEC 1473 (7-02)

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.

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 of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title			

Edgar Filing: Poloway Jeffrey D - Form 3

	Expiration Date	Expiration Date	Amount or Number of Shares	Amount or Number of Shares	or Indirect (I) (Instr. 5)	
Stock Appreciation Rights	02/13/2010 ⁽²⁾	02/13/2019	Common Stock	36,306 \$ 2.17	D	Â
Stock Appreciation Rights	01/31/2009 ⁽²⁾	01/31/2018	Common Stock	29,180 \$ 15.27	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Poloway Jeffrey D 414 UNION STREET SUITE 2000 NASHVILLE, TN 37219	Â	Â	Â	Corporate Controller

Signatures

By: /s/ Mark A Fuchs For: Jeffrey D. Poloway
Date: 02/13/2009

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- Represents restricted shares granted pursuant to Louisiana-Pacific Corporation 1997 Incentive Share Award Plan, subject to forfeiture if the reporting person ceases to be an employee before the third anniversary of the grant date. Value of the shares is determined at vesting.
- (1) Includes 7,991 restricted stock and 2,660 restricted stock that will vest on February 13, 2012 and 2,660 which will vest on January 31, 2011.
 - (2) Represents stock settled stock appreciation rights (SSAR) granted pursuant to Louisiana Pacific Corporation 1997 Incentive Stock Award Plan. SSARs vest in three equal installments, with the first vesting on this date.

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.