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**SECURITIES AND EXCHANGE COMMISSION**

Washington, DC 20549

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**SCHEDULE 13G**

(Rule 13d-102)

**INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT  
TO § 240.13d-1(b), (c) AND (d) AND AMENDMENTS THERETO FILED  
PURSUANT TO § 240.13d-2**

(Amendment No. )

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**LIBERTY MEDIA CORPORATION**

(Name of Issuer)

**SERIES C COMMON STOCK**

(Title of Class of Securities)

**531229300**

(CUSIP Number)

**December 31, 2015**

(Date of Event Which Requires Filing of this Statement)

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Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

Rule 13d-1 (b)

Rule 13d-1 (c)

Rule 13d-1 (d)

\* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 (the "Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes.)

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1	NAME OF REPORTING PERSON  Warren E. Buffett	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  United States Citizen	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5	SOLE VOTING POWER  NONE
	6	SHARED VOTING POWER  15,386,257
	7	SOLE DISPOSITIVE POWER  NONE
	8	SHARED DISPOSITIVE POWER  15,386,257
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  15,386,257	
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/>  Not Applicable.	
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  6.9%	
12	TYPE OF REPORTING PERSON  IN	

1	NAME OF REPORTING PERSON  Berkshire Hathaway Inc.	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  State of Delaware	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5	SOLE VOTING POWER  NONE
	6	SHARED VOTING POWER  15,386,257
	7	SOLE DISPOSITIVE POWER  NONE
	8	SHARED DISPOSITIVE POWER  15,386,257
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  15,386,257	
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/>  Not applicable.	
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  6.9%	
12	TYPE OF REPORTING PERSON  HC, CO	



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1	NAME OF REPORTING PERSON  GEICO Corporation	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> A MEMBER	



1	NAME OF REPORTING PERSON  GEICO Indemnity Company	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  State of Maryland	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5	SOLE VOTING POWER  NONE
	6	SHARED VOTING POWER  2,852,776
	7	SOLE DISPOSITIVE POWER  NONE
	8	SHARED DISPOSITIVE POWER  2,852,776
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  2,852,776	
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/>  Not applicable.	
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  1.3%	
12	TYPE OF REPORTING PERSON  IC, CO	

1	NAME OF REPORTING PERSON  FlightSafety International Inc. Retirement Income Plan	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  State of New York	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5	SOLE VOTING POWER  NONE
	6	SHARED VOTING POWER  400,000
	7	SOLE DISPOSITIVE POWER  NONE
	8	SHARED DISPOSITIVE POWER  400,000
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  400,000	
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/>  Not applicable.	
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  0.2%	
12	TYPE OF REPORTING PERSON  EP	



1	NAME OF REPORTING PERSON  GEICO Corporation Pension Plan Trust
2 TE	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>

1	NAME OF REPORTING PERSON  Johns Manville Corporation Master Pension Trust	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  State of Colorado	
NUMBER OF		

1	NAME OF REPORTING PERSON  BNSF Master Retirement Trust	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  State of Texas s s Sy	
NUMBER OF SHARES OF 20 P BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH		
	PTDA	

1	NAME OF REPORTING PERSON  General Re Corp. Employee Retirement Trust
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>
3	

1	NAME OF REPORTING PERSON  Lubrizol Corp. Master Trust Pension	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  State of Ohio	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5	SOLE VOTING POWER  NONE
	6	SHARED VOTING POWER  150,000
	7	SOLE DISPOSITIVE POWER  NONE
	8	SHARED DISPOSITIVE POWER  150,000
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  150,000	
10	CHECK	

1	NAME OF REPORTING PERSON  R. Ted Weschler	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/>	
3	SEC USE ONLY	
4	CITIZENSHIP OR PLACE OF ORGANIZATION  United States Citizen	
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5	SOLE VOTING POWER  571,668
	6	SHARED VOTING POWER  0
	7	SOLE DISPOSITIVE POWER  571,668
	8	SHARED DISPOSITIVE POWER  16,554
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  588,222	
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/>  Not Applicable.	
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9  0.3%	
12	TYPE OF REPORTING PERSON  IN	

SCHEDULE 13G

Item 1.

(a) Name of Issuer

LIBERTY MEDIA CORPORATION

(b) Address of Issuer's Principal Executive Offices

12300 Liberty Boulevard, Englewood, CO 80112

Item 2(a). Name of Person Filing:

Item 2(b). Address of Principal Business Office:

Item 2(c). Citizenship:

Warren E. Buffett  
3555 Farnam Street  
Omaha, Nebraska 68131  
United States Citizen

National Indemnity Company  
1314 Douglas Street  
Omaha, Nebraska 68102  
Nebraska corporation

Government Employees Insurance Company  
One GEICO Plaza  
Washington, DC 20076  
Maryland Corporation

GEICO Indemnity Company  
One GEICO Plaza  
Washington, DC 20076  
Maryland Corporation

FlightSafety International Inc. Retirement Income Plan  
c/o FlightSafety International Inc.  
McGuardia Airport  
Flushing, NY 11371  
New York

GEICO Corporation Pension Plan Trust  
c/o GEICO Corporation  
1 Geico Plaza  
Washington, DC 20076  
Maryland

Berkshire Hathaway Inc.  
3555 Farnam Street  
Omaha, Nebraska 68131  
Delaware corporation

GEICO Corporation  
One GEICO Plaza  
Washington, DC 20076  
Delaware Corporation

National Fire & Marine Insurance Company  
1314 Douglas Street  
Omaha, NE 68102  
Nebraska Corporation

Fruit of the Loom Pension Trust  
c/o Fruit of the Loom  
1 Fruit of the Loom Drive  
Bowling Green, KY 42102  
Kentucky

Lubrizol Corp. Master Trust Pension  
c/o The Lubrizol Corporation  
29400 Lakeland Boulevard  
Wickliffe, OH 44092  
Ohio

Johns Manville Corporation Master Pension Trust  
c/o Johns Manville Corporation  
717 17



**Item 6. Ownership of More than Five Percent on Behalf of Another Person.**

Not Applicable.

**Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company or Control Person.**

See Exhibit A.

**Item 8. Identification and Classification of Members of the Group.**

See Exhibit A.

**Item 9. Notice of Dissolution of Group.**

Not Applicable.

**Item 10. Certification.**

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under § 240.14a-11.

**SIGNATURES**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated this 16<sup>th</sup> day of February, 2016

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**SCHEDULE 13G**

**EXHIBIT A**

**RELEVANT SUBSIDIARIES AND MEMBERS OF FILING GROUP**

PARENT HOLDING COMPANIES OR CON8G

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**SCHEDULE 13G**

**EXHIBIT**

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National Fire & Marine Insurance Company

Dated: February 16, 2016

/S/ Marc D. Hamburg

By: Marc D. Hamburg  
Title: Chairman of the Board

GEICO Indemnity Company

Dated: February 16, 2016

/S/ Michael H. Campbell

By: Michael H. Campbell  
Title: Senior Vice President

Fruit of the Loom Pension Trust

Dated: February 16, 2016

/S/ Rick Medlin

By: Rick Medlin  
Title: President and Chief Executive Officer, Fruit of the Loom

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Dated: February 16, 2016

/S/ Brian Valentine

By: Brian Valentine

Title: Senior Vice President, The Lubrizol Corporation

Dated: February 16, 2016

/S/ R. Ted Weschler

R. Ted Weschler