INTERNATIONAL BUSINESS MACHINES CORP Form SC 13G/A February 14, 2014

SECURITIES AND EXCHANGE COMMISSION

Washington, DC 20549

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. 2)*

International Business Machines Corporation

(Name of Issuer)

COMMON STOCK

(Title of Class of Securities)

459200101

(CUSIP Number)

December 31, 2013

(Date of Event Which Requires Filing of this Statement)

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

x 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.)

13G CUSIP No. 459200101 Page 2 of 21 Pages 1 NAME OF REPORTING PERSONS Warren E. Buffett 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION United States Citizen 5 SOLE VOTING POWER NUMBER OF 9,000 **SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 68,121,984 7 SOLE DISPOSITIVE POWER **EACH** REPORTING 9,000 **PERSON** 8 SHARED DISPOSITIVE POWER WITH 68,121,984 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 68,130,984 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not Applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

6.3%

12 TYPE OF REPORTING PERSON*

IN

13G CUSIP No. 459200101 Page 3 of 21 Pages 1 NAME OF REPORTING PERSONS Berkshire Hathaway Inc. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 68,121,984 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 68,121,984 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 68,121,984 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

6.3%

12

TYPE OF REPORTING PERSON*

HC, CO

13G CUSIP No. 459200101 Page 4 of 21 Pages 1 NAME OF REPORTING PERSONS National Indemnity Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 67,439,916 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 67,439,916 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 67,439,916 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

6.2%

12

TYPE OF REPORTING PERSON*

13G CUSIP No. 459200101 Page 5 of 21 Pages 1 NAME OF REPORTING PERSONS Berkshire Hathaway Assurance Corporation CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 506,000 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 506,000 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 506,000 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 6 of 21 Pages 1 NAME OF REPORTING PERSONS Columbia Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 597,588 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 597,588 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 597,588 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 7 of 21 Pages 1 NAME OF REPORTING PERSONS Central States of Omaha Companies, Inc. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 84,480 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 84,480 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 84,480 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

HC, CO

CUS	SIP No. 459200101	13G	Page 8 of 21 Pages		
1	NAME OF REPORTING PERSONS				
2	Central States Indemnity Company of Omaha CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* (a) x (b) "				
3	SEC USE ONLY				
4	CITIZENSHIP OR PLACE OF ORGANIZATION				
	State of Nebraska 5 SOLE VOTING POWER				
NUMB SHA	ER OF NONE RES 6 SHARED VOTING POWER				
BENEFI	CIALLY				
OWNI EA	79,200 The control of				
REPO	RTING				
PER WI	SON NONE 8 SHARED DISPOSITIVE POWER TH				
9	79,200 AGGREGATE AMOUNT BENEFICIALLY OWNER	D BY EACH REPORTING PERSON			
10	79,200 CHECK BOX IF THE AGGREGATE AMOUNT IN	ROW (9) EXCLUDES CERTAIN SHARES*			
11	Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT	NT IN ROW 9			

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 9 of 21 Pages 1 NAME OF REPORTING PERSONS CSI Life Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 5,280 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 5,280 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 5,280 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 10 of 21 Pages 1 NAME OF REPORTING PERSONS Finial Reinsurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Connecticut 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 353,000 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 353,000 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 353,000 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 11 of 21 Pages 1 NAME OF REPORTING PERSONS National Indemnity Company of the South CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Florida 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 103,000 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 103,000 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 103,000 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 12 of 21 Pages 1 NAME OF REPORTING PERSONS **Boat America Corporation** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Virginia 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 34,000 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 34,000 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 34,000 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

HC, CO

13G CUSIP No. 459200101 Page 13 of 21 Pages 1 NAME OF REPORTING PERSONS Seaworthy Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 34,000 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 34,000 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 34,000 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 14 of 21 Pages 1 NAME OF REPORTING PERSONS GEICO Advantage Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 58,700 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 58,700 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 58,700 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 15 of 21 Pages 1 NAME OF REPORTING PERSONS **GEICO Casualty Company** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 298,300 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 298,300 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 298,300 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 16 of 21 Pages 1 NAME OF REPORTING PERSONS **GEICO Choice Insurance Company** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 58,900 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 58,900 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 58,900 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

13G CUSIP No. 459200101 Page 17 of 21 Pages 1 NAME OF REPORTING PERSONS Berkshire Hathaway Specialty Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY OWNED BY 3,171,337 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 3,171,337 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 3,171,337 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

0.3%

12 TYPE OF REPORTING PERSON*

13G CUSIP No. 459200101 Page 18 of 21 Pages 1 NAME OF REPORTING PERSONS **GEICO Secure Insurance Company** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP* 2 **(b)** " (a) x SEC USE ONLY 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER NUMBER OF **NONE SHARES** 6 SHARED VOTING POWER BENEFICIALLY **OWNED BY** 58,900 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER WITH 58,900 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 58,900 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES* 10 Not applicable. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11

Less than 0.1% TYPE OF REPORTING PERSON* 12

Page 19 of 21 Pages

GEICO Advantage Insurance

SCHEDULE 13G

Item 1.

(a) Name of Issuer:

International Business Machines Corporation

(b) Address of Issuer s Principal Executive Offices:

1 New Orchard Road, Armonk, NY 10504

Item 2(a). Name of Person Filing:

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

Item 2(c). Citizenship:

Warren E. Buffett

Waiten E. Builett	Harney Street	Timal remarance company	Company
3555 Farnam Street		100 Stamford Plaza	
	Omaha, Nebraska 68131	Stamford, Connecticut 06962	5260 Western Avenue
Omaha, Nebraska 68131	N. 1		Chevy Chase, Maryland 20815
H : 10 (C')	Nebraska corporation	Connecticut corporation	Nebraska corporation
United States Citizen			reoraska corporation
Berkshire Hathaway Inc.	Central States of Omaha	National Indemnity Company of the	GEICO Casualty Company
	Companies, Inc.	South	
3555 Farnam Street			5260 Western Avenue
	1212 North 96th Street Omaha,	3024 Harney Street	Chevy Chase, Maryland 20815
Omaha, Nebraska 68131 Delaware corporation	Nebraska 68114	Omaha, Nebraska 68131	Maryland corporation
Delaware corporation	Nebraska corporation	Olitalia, Nebraska 08131	
		Florida corporation	
		-	
National Indemnity Company	Central States Indemnity Company	Boat America Corporation	GEICO Choice Insurance
2024 II St	of Omaha	880 South Pickett Street	Company
3024 Harney Street	1212 North 96th Street	880 South Pickett Street	5260 Western Avenue
Omaha, Nebraska 68131	12121102011 / 01111 / 012100	Alexandria, Virginia 22304	Chevy Chase, Maryland 20815
Nebraska corporation	Omaha, Nebraska 68114		
		Virginia corporation	Nebraska corporation
	Nebraska corporation		
Berkshire Hathaway	CSI Life Insurance Company	Seaworthy Insurance Company	GEICO Secure Insurance
Derksinie Hamaway	Con Life insurance Company	Seaworusy insurance Company	Company
Assurance Corporation	1212 North 96th Street Omaha,	880 South Pickett Street	1 7

Columbia Insurance Company 3024 Finial Reinsurance Company

3024 Harney Street Nebraska 68114 Alexandria, Virginia 22304 5260 Western Avenue

Chevy Chase, Maryland 20815

Omaha, Nebraska 68131 Nebraska corporation Maryland corporation

Nebraska corporation

Nebraska corporation

Berkshire Hathaway Specialty

Insurance Company

3024 Harney Street

Omaha, Nebraska 68131

Nebraska corporation

(d) Title of Class of Securities:

Common Stock

(e) CUSIP Number:

459200101

Item 3. If this statement is filed pursuant to §§240.13d-1(b), or 240.13d-2(b) or (c), check whether the person filing is a:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.), Berkshire Hathaway Inc., Central States of Omaha Companies, Inc. and Boat America Corporation are each a Parent Holding Company or Control Person, in accordance with §240.13d-1(b)(1)(ii)(G).

National Indemnity Company, Berkshire Hathaway Assurance Corporation, Berkshire Hathaway Specialty Insurance Company, Columbia Insurance Company, Central States Indemnity Company of Omaha, CSI Life Insurance Company, Finial Reinsurance Company, National Indemnity Company of the South, Seaworthy Insurance Company, GEICO Advantage Insurance Company, GEICO Choice Insurance Company and GEICO Secure Insurance Company are each an Insurance Company as defined in section 3(a)(19) of the Act.

The Reporting Persons together are a Group in accordance with §240.13d-1(b)(1)(ii)(K).

Page	20	of	21	Pages

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Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

(a) Amount beneficially owned:

See the Cover Pages for each of the Reporting Persons.

(b) Percent of class:

See the Cover Pages for each of the Reporting Persons.

- (c) Number of shares as to which such person has:
 - (i) sole power to vote or to direct the vote
 - (ii) shared power to vote or to direct the vote
 - (iii) sole power to dispose or to direct the disposition of
- (iv) shared power to dispose or to direct the disposition of See the Cover Pages for each of the Reporting Persons.

Item 5. Ownership of Five Percent or Less of a Class.

Not Applicable.

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 acquired and are held in the ordinary course of business and 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.

Page 21 of 21 Pages

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.

February 14, 2014 Date

/s/ Warren E. Buffett Signature

Warren E. Buffett Name Berkshire Hathaway Inc.

By: /s/ Warren E. Buffett Signature

Warren E. Buffett, Chairman of the Board Name/Title

> February 14, 2014 Date

Berkshire Hathaway Assurance Corporation
Columbia Insurance Company
Central States Indemnity Company of Omaha
CSI Life Insurance Company
Finial Reinsurance Company
National Indemnity Company
National Indemnity Company of the South
Seaworthy Insurance Company
GEICO Advantage Insurance Company
GEICO Casualty Company
GEICO Choice Insurance Company
GEICO Secure Insurance Company
Central States of Omaha Companies, Inc.
Boat America Corporation

Berkshire Hathaway Specialty Insurance Company

By: /s/ Warren E. Buffett Signature

> Warren E. Buffett Attorney-in-Fact

> > Name/Title

February 14, 2014 Date

SCHEDULE 13G

EXHIBIT A

RELEVANT SUBSIDIARIES AND MEMBERS OF FILING GROUP

PARENT HOLDING COMPANIES OR CONTROL PERSONS:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.)

Berkshire Hathaway Inc.

Central States of Omaha Companies, Inc.

Boat America Corporation

INSURANCE COMPANIES AS DEFINED IN SECTION 3(a)(19) OF THE ACT:

National Indemnity Company, Berkshire Hathaway Assurance Corporation, Berkshire Hathaway Specialty Insurance Company, Columbia Insurance Company, Central States Indemnity Company of Omaha, CSI Life Insurance Company, Finial Reinsurance Company, National Indemnity Company of the South, Seaworthy Insurance Company, GEICO Advantage Insurance Company, GEICO Casualty Company, GEICO Choice Insurance Company and GEICO Secure Insurance Company

SCHEDULE 13G

EXHIBIT B

JOINT FILING AGREEMENT PURSUANT TO RULE 13d-1(k)(1)

AND POWER OF ATTORNEY

The undersigned persons agree and consent to the joint filing on their behalf of Schedule 13G and all amendments thereto in connection with their beneficial ownership of the Common Stock of International Business Machines Corporation.

Each person other than Warren E. Buffett whose signature appears below hereby constitutes and appoints Warren E. Buffett as his true and lawful attorney-in-fact and agent with full power of substitution and resubstitution, to act for him and in his name, place and stead, in any and all capacities, to sign a Schedule 13G and any or all amendments to Schedule 13G in connection with the beneficial ownership of the Common Stock of International Business Machines Corporation, and to file the same, with all exhibits thereto, and other documents in connection therewith, with the Securities and Exchange Commission, granting unto said attorney-in-fact and agent full power and authority to do and perform each and every act and thing requisite and necessary to be done in and about the premises, as fully to all intents and purposes as he might or could do in person, hereby ratifying and confirming all that said attorney-in-fact and agent or his substitute may lawfully do or cause to be done by virtue hereof.

Dated: February 14, 2014 /S/ Warren E. Buffett

Warren E. Buffett

Berkshire Hathaway Inc.

Dated: February 14, 2014 /S/ Warren E. Buffett By: Warren E. Buffett

Dated: February 14, 2014

Dated: February 14, 2014

Dated: February 14, 2014

Title: Chairman of the Board

National Indemnity Company

/S/ Dale D. Geistkemper By: Dale D. Geistkemper

Title: Treasurer

Berkshire Hathaway Assurance Corporation

/S/ Dale D. Geistkemper By: Dale D. Geistkemper

Title: Treasurer

Columbia Insurance Company

/S/ Dale D. Geistkemper By: Dale D. Geistkemper

Title: Treasurer

Central States of Omaha Companies, Inc.

Dated: February 14, 2014 /S/ Thomas B. Schlichting

By: Thomas B. Schlichting

Title: CFO

CSI Life Insurance Company

Dated: February 14, 2014 /S/ Thomas B. Schlichting

By: Thomas B. Schlichting

Title: CFO

Central States Indemnity Company of Omaha

Dated: February 14, 2014 /S/ Thomas B. Schlichting

By: Thomas B. Schlichting

Title: CFO

Finial Reinsurance Company

Dated: February 14, 2014 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Title: Treasurer

National Indemnity Company of the South

Dated: February 14, 2014 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Title: Treasurer

Boat America Corporation

Dated: February 14, 2014 /S/ William M. Oakerson

By: William M. Oakerson

Title: Chairman

Seaworthy Insurance Company

Dated: February 14, 2014 /S/ William M. Oakerson

By: William M. Oakerson

Title: Chairman

GEICO Advantage Insurance Company

Dated: February 14, 2014 /S/ Charles G. Schara

By: Charles G. Schara

Title: Treasurer

GEICO Casualty Company

Dated: February 14, 2014 /S/ Charles G. Schara

By: Charles G. Schara Title: Treasurer

GEICO Choice Insurance Company

Dated: February 14, 2014 /S/ Charles G. Schara

By: Charles G. Schara Title: Treasurer

GEICO Secure Insurance Company

Dated: February 14, 2014 /S/ Charles G. Schara

By: Charles G. Schara Title: Treasurer

Berkshire Hathaway Specialty Insurance Company

Dated: February 14, 2014 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Title: Treasurer