Legg Mason BW Global Income Opportunities Fund Inc.

Form 3

February 24, 2015

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

OMB APPROVAL

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response...

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SECURITIES

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

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)

1. Name and Address of Reporting Person * WESTERN & SOUTHERN LIFE INSURANCE CO			2. Date of Event Requiring Statement (Month/Day/Year) 02/18/2015		3. Issuer Name and Ticker or Trading Symbol Legg Mason BW Global Income Opportunities Fund Inc [BWG]			
(Last)	(First)	(Middle)			4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)
400 BROAD	WAY							(
(Street)					(Check all applicable)			6. Individual or Joint/Group
CINCINNATI, OH 45202					DirectorX 10% Owner Officer Other (give title below) (specify below)			Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)		Table I - N	Non-Derivative Securities Beneficially Owned			
1.Title of Secur (Instr. 4)	ity			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	*
Mandatory Redeemable Preferred Stock (Series A)				100		I	Shares held by a wholly-owned subsidiary (WSLAC)	
Mandatory Redeemable Preferred Stock (Series A)				50		I	Shares held by a wholly-owned subsidiary (ILIC)	
Mandatory F (Series A)	Redeemab	le Preferred S	Stock	50		I		es held by a wholly-owned idiary (NILIC)
Reminder: Repo	_	rate line for eac	h class of secu	ırities benefici	ially S	EC 1473 (7-02)	
	inforı requi	ons who respondation contained to respondently valid OM	ned in this f d unless the	orm are not e form displ				

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

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1. Title of Derivative Security (Instr. 4)

Expiration Date (Month/Day/Year)

2. Date Exercisable and 3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise Price of Derivative Security

5. Ownership Form of Derivative Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Expiration Date Exercisable Date

Amount or Title Number of

Shares

Reporting Owners

Relationships

Director

10% Owner

Officer Other

Â

WESTERN & SOUTHERN LIFE INSURANCE CO 400 BROADWAY CINCINNATI, OHÂ 45202

Reporting Owner Name / Address

ÂXÂ Â

Signatures

/s/ Jeffrey L. Stainton, Vice President

02/24/2015

**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).

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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