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BIGGART JAMES H									
Form 4									
December 09, 2010									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								MB APPROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287	
Check this box if no longer CTLATER (TERMENTE OF CHANCES IN DENTED OF CHANCES IN DENTED OF							Expires:	January 31, 2005	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES							nated average en hours per		
Form 5 obligations may continue. See Instruction 1(b). 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 BIGGART JAMES H	ymbol				5. Relationship of Reporting Person(s) to Issuer				
						x all applicable)			
(Last) (First)	(First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)				Director 10% Owner				
C/O HUBBELL INCORPORATED, 40 WATERVIEW DRIVE	2/07/2010 <u>_X_</u> Offic below)				· · · · · · · · · · · · · · · · · · ·	(give title Other (specify below) President and Treasurer			
(Street)	Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
SHELTON, CT 06484 _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City) (State)	(Zip) Ta	ble I - Non-Do	erivative S	Securi	ties Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)			ed of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Class B Common 12/07/2010 (\$.01 Par)		F/K(1)	96	D	\$ 60.105	15,608	D		
Class B Common (\$.01 Par)						4 <u>(2)</u>	Ι	Shares owned by son $\frac{(2)}{2}$	

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

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number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
_			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BIGGART JAMES H C/O HUBBELL INCORPORATED 40 WATERVIEW DRIVE SHELTON, CT 06484			Vice President and Treasurer	1				
Signatures								
Richard W. Davies Attorney-in-fact for Biggart	r James H.	12/09/2010						
<u>**</u> Signature of Reporting Person		Dat	e					

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(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).
- (1) Shares withheld for payment of taxes upon vesting of restricted shares.

The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose. The reporting person no

(2) Reporting person is the objection owner of such securities for purposes of section to or for any other purpose. The reporting person is longer has beneficial ownership of the 4 shares of Hubbell Class B Common stock owned by his non-minor son and included in the reporting person's prior ownership reports.

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.