Edgar Filing: HOFFMAN JOEL S - Form 4

HOFFMAN Form 4	V JOEL S										
January 26,	2011										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549								NOMB Number:	3235-0287		
Check t if no lo							Expires:	January 31, 2005			
subject Section Form 4	to STATE 16.	MENT OF	F CHAN	NGES IN SECUI	Estimated burden hou	Estimated average burden hours per					
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 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									. 0.5		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> HOFFMAN JOEL S			Symbol	er Name an e		c	5. Relationship of Reporting Person(s) to Issuer				
			HUBB	ELL INC	[HUBA	, HUBB]	(Check all applicable)				
(Last) (First) (Middle)				of Earliest T	ransaction						
101 APAWAMIS AVENUE (Street)			(Month/) 01/25/2	Day/Year) 2011			X_ Director 10% Owner Officer (give title Other (specify below) below)				
			4. If Am	endment, D	ate Origin	al	6. Individual or Joint/Group Filing(Check				
RYE, NY		Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
							Person				
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed of	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D) Price	(Instr. 3 and 4)				
Reminder: Re	eport on a separate line	e for each cla	ass of sec	urities bene	•	•	•				
					infor	nation con	spond to the collect tained in this form	are not	SEC 1474 (9-02)		

information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired		

	Derivative Security						(A) orDisposed(D)(Instr. 3, and 5)					
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Directors Deferred Compensation Stock Units (1)	\$ 118.22 (2)	01/25/201	l		A		6.767 (1)		(3)	<u>(3)</u>	Class A and Class B Common Stock	6.767 (<u>1)</u>
Reporting	g Ownei	ſS										
Reporting Owner	Name / Address	5 Director	Relationsh 10% Owner	i ps Officer	Other							
HOFFMAN JOI 101 APAWAMI RYE, NY 10580	IS AVENUE	Х										
Signature	es											
Richard W. Davies, Attorney-in-fact for Joel S. Hoffman					01/26	5/2	011					
<u>**</u> Signature of Reporting Person					Date							
Explanati	on of R	espon	ses:									

- * 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) Equal number of share of Class A and Class B Common Stock credited as units under Hubbell's Deferred Compensation Plan.
- (2) Unit price consisting of the closing price of one share each of Class A and Class B Common Stock.
- (3) Deferred Units are payable commencing on the January 1 following the reporting person's retirement or separation from the Board

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.