### Edgar Filing: GENERAL CABLE CORP /DE/ - Form 4

GENERAL C Form 4 February 17,	CABLE CORP /D 2015	E/									
FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. Check this box if no longer STATEMENT O Section 17(a) of the 20(1)			S SECURITIES AND EXCHANGE C Washington, D.C. 20549 F CHANGES IN BENEFICIAL OW SECURITIES Section 16(a) of the Securities Exchang Public Utility Holding Company Act of					<b>NERSHIP OF</b> the Act of 1934, f 1935 or Sectio	OMB Number: Expires: Estimated a burden hou response	rs per	
See Instru 1(b). (Print or Type R		50(II) 0		vestment	Compan	y Aci	. 01 19-	+0			
1. Name and A Moser Emer		2. Issuer Name <b>and</b> Ticker or Trading Symbol GENERAL CABLE CORP /DE/ [BGC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 4 TESSENEER DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 02/13/2015					Director 10% Owner X Officer (give title Other (specify below) below) SVP, General Counsel & Sec.			
		4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
HIGHLAND	DHEIGHTS, KY	41076						Form filed by M Person	More than One Re	eporting	
(City)	(State) (2	Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acc	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/13/2015			F	564 <u>(1)</u>		\$ 14.4	26,208	D		
Common Stock								1,094.947 <u>(2)</u>	Ι	GCC Trusts	

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

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	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							
1 0	Director	10% Owner	Officer	Other				
Moser Emerson C 4 TESSENEER DRIVE HIGHLAND HEIGHTS, KY 41076			SVP, General Counsel & Sec.					
Signatures								

/s/ Emerson C. 02/17/2015 Moser

<u>\*\*</u>Signature of Reporting Person Date

## **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) One-third of the restricted stock units ("RSUs") granted to the reporting person on February 13, 2014 vested on the transaction date. Of the total 1,334 RSUs that vested, the reporting person has elected to surrender 564 shares to the issuer to satisfy tax withholding.
- (2) These shares are held in the General Cable Retirement Savings Plan as share equivalents and are valued at the market close price on February 9, 2015.

#### **Remarks:**

The filing of this Statement shall not be construed as an admission (a) that the person filing this Statement is, for the purposes

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.