SEC Form	4																		
F		UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				STATEMENT OF CHANGES IN BENEFICIAL OWNERS Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934												OMB Number: 3235-0287 Estimated average burden hours per response: 0.5			
1. Name and Address of Reporting Person [*] Guzzi Anthony					or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol <u>HUBBELL INC</u> [HUBB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(Last) (First) C/O HUBBELL INCORPORATED 40 WATERVIEW DRIVE			(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/15/2023								Officer (give title Other (specify below) below)				ecify	
							4. If Amendment, Date of Original Filed (Month/Day/Year)								S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person				
(Street) SHELTON	,			06484			065-1/	(c)	Tranca	octiv	on India		Form filed by More than One Reporting Person						
(City)	e) (Z	(Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - Nor	-Deriv	vative	e Sec	urities	Acq	juired,	Dis	posed of	, or Ben	eficially	Owned					
Date				Date	Transaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr. 8)							6. Owner Form: Dii (D) or Ind (I) (Instr.	rect In lirect B 4) O	7. Nature of ndirect Beneficial Dwnership Instr. 4)	
							Code	v	Amount	(A) or (D)	Price	Transactio			(1	isu. 4j			
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		Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	ly Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	/			
Directors Deferred Compensation Stock Units ⁽¹⁾	(1)	08/15/2023			A		111.673		(2)		(2)	Common Stock	111.673	\$306.7 ⁽³⁾	31,390.708	8 ⁽⁴⁾	D		

Explanation of Responses:

1. Each Directors Deferred Compensation Stock Unit consists of one share of Common Stock credited as units under the Company's Deferred Plan for Directors.

2. Deferred units are payable commencing the fifth business day of January following the reporting person's retirement or separation from the Board.

3. Unit price consisting of the closing price of one share of Common Stock.

4. This total includes reinvested dividends that have been paid on the individual's Directors Deferred securities.

Remarks:

Katherine A. Lane, Attorney-infact for Anthony J. Guzzi 08/17/2023

** Signature of Reporting Person Date

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.