FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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on, D.C. 20549	OMB APPROVAL
	OND ALL NOVAL

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	OMB Number:	3235-0287
	Estimated average bur	den

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 OWNERSHIP hours per response: 0.5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol HUBBELL INC [HUBB]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Guzzi Anthony</u>				UODDELL INC [HORR]							Ι,	Director	,	10% Owner		ner		
-													Officer (give title		Other (sp	ecify	
(Last)	(First) (M	3. Date of Earliest Transaction (Month/Day/Year)								below) below)							
C/O HUBB	02/14/2020																	
40 WATERVIEW DRIVE																		
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street)												Line		ad bu . On a . T		Davasa		
SHELTON	CT	06	5484										_	Form filed by One Reporting Person Form filed by More than One Reporting Per				
													Form file	ed by More 1	than O	ne Reportin	ig Person	
(City)	(State	e) (Z	ip)															
		Tab	le I - Non	ı-Deriv	ative	e Se	curities	Acq	uired, Di	sposed o	f, or Ber	neficially	Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/It					n/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.		d (A) or r. 3, 4 and 5	Beneficial Owned Fo	Form (D) o ollowing (I) (In		Direct Ir ndirect B r. 4) O	7. Nature of ndirect Beneficial Ownership		
									Code V	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 ar			"	nstr. 4)	
	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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			Date,	1. Title and Ar of Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 5. Number of Derivative Securities (Month/Day/Year) 6. Date Exercisable and Expiration Date (Month/Day/Year) 6. Date Exercisable and Expiration Date (Month/Day/Year) 6. Date Exercisable and For Securities (Month/Day/Year) 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Ar of Securities (Month/Day/Year) 7. Title and Ar of Securities (Month/Day/Year) 8. Acquired (A) or Disposed (Instr. 3 and 4 and 5)					ties ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	,,,(3)			
Directors Deferred Compensation Stock Units ⁽¹⁾	(1)	02/14/2020			A		203.335		(2)	(2)	Common Stock	203.335	\$147.54 ⁽³⁾	26,994.50)3 ⁽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 dividend equivalents that have been paid on the individual's Directors Deferred securities.

Remarks:

Katherine A. Lane, Attorney-infact for Anthony J. Guzzi

02/18/2020

** 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.