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CLEMENTI CAROLE ANNE Form 5 January 08, 2 FORM

Form 5								
January 08,	2010							
FORM	15						OMB AF	PPROVAL
-	UNITED	STATES			D EXCHANGE C	OMMISSION	OMB Number:	3235-0362
Check thi no longer	subject		Was	shington, D	.C. 20549		Expires:	January 31, 2005
to Section Form 4 or 5 obligati may cont	r Form ANN ons inue.				IANGES IN BENI SECURITIES	EFICIAL	Estimated a burden hou response	
See Instru 1(b). Form 3 H Reported Form 4 Transacti Reported	Filed pu ^{foldings} Section 17	(a) of the H	Public U	tility Holdin	Securities Exchange og Company Act of ompany Act of 194	1935 or Section	1	
	Address of Reporting I CAROLE ANN		Symbol GENEF	Name and Tick RAL AMER TORS CO I	ICAN	5. Relationship of Issuer (Checl	Reporting Pers	
(M			3. Statement for Issuer's Fiscal Year Ended(Month/Day/Year)12/31/2009			Director 10% Owner Officer (give title Other (specify below) below) below) Corporate Secretary		
	RS CO INC, 10 - 35TH FLOOR	0 PARK						
	(Street)			endment, Date nth/Day/Year)	Original	6. Individual or Jo (check	int/Group Repo	-
NEW YOR	K, NY 10017	,				_X_ Form Filed by 0 Form Filed by M Person		
(City)	(State)	(Zip)	Tabl	le I - Non-Der	ivative Securities Acqu	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security	2. Transaction Dat (Month/Day/Year)				4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		Ownership	7. Nature of Indirect Beneficial

NEW	YORK,	NYÂ	10017

(City)	(State)	(Zip) Tabl	e I - Non-Der	ivative Se	curitie	es Acquir	ed, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)			4. Securities Acquired tion (A) or Disposed of (D) (Instr. 3, 4 and 5)) (A)			5. Amount of Securities Ownership Beneficially Form: Direc Owned at end (D) or of Issuer's Indirect (I) Fiscal Year (Instr. 4) (Instr. 3 and	Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/28/2009	Â	J <u>(1)</u>	Amount 23	or (D) A	Price \$ 22.86	4) 1,567	D	Â
Common Stock	12/31/2009	Â	J <u>(2)</u>	2,442	A	\$ <u>(2)</u>	51,626	Ι	By Thrift Plan Trust (3)
5.95 Preferred	Â	Â	Â	Â	Â	Â	260	D	Â

Stock

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

Persons who respond to the collection of information **SEC 2270** 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. of D Se B O E I S Fi (I
				4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		~

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
CLEMENTI CAROLE ANNE C/O GENERAL AMERICAN INVESTORS CO INC 100 PARK AVENUE - 35TH FLOOR NEW YORK, NY 10017	Â	Â	Corporate Secretary	Â		
Signaturas						

Signatures

Carole Anne	01/08/2010			
Clementi	01/08/2010			
**Signature of	Deta			

<u>Signature of</u> Reporting Person

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 received in payment of dividends.
- The securities reported herein were acquired on a periodic basis in open market transactions at the then prevailing market prices pursuant (2)to the Issuer's Employees' Thrift Plan. The information is based upon a statement as of 12/31/09 issued by the Plan Administrator.
- (3) By Issuer's Employees' Thrift Plan Trust. The undersigned disclaims any beneficial interest in these shares.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

(9-02)