## Edgar Filing: DAVIDSON SPENCER - Form 4

DAVIDSON Form 4	N SPENCER											
December 2										PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB					
Check th	iis box	Washington, D.C. 20549							Number: Expires:	3235-0287 January 31,		
if no lon subject t Section Form 4 of Form 5 obligatio may con <i>See</i> Instr 1(b).	ger o 16. or Filed pu ons tinue. Section 17	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> 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 20(b) of the Investment Company Act of 1940										
(Print or Type	Responses)											
DAVIDSON SPENCER Symb GEN				Name and AL AME FORS CC	ERICAN		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)(First)(Middle)3. Date o(Month/IGENERAL AMERICANINVESTORS CO INC, 100 PARKAVENUE - 35TH FLOOR				-				Director 10% Owner X Officer (give title Other (specify below) below) President & CEO				
				ndment, Date Original hth/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> <li>Person</li> </ul>				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	<ul> <li>Execution</li> <li>any</li> </ul>		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
5.95% Preferred Stock	12/22/2010			Р	200	A	\$ 24.85	2,741	D <u>(1)</u>			
5.95% Preferred Stock								87,400	I	By Trusts		
Common Stock								654,957	D <u>(1)</u>			
Common								562,712	Ι	By Trusts		

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		Laga												
Stock									(2)					
Common Stock						41,230	Ι		-	Thrift n Trust				
Reminder: R	Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.													
				Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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)	ive Conversion (Month/Day/Year) Execution or Exercise any		Execution Date, if	ate, if TransactionNumber Exp Code of (Mo			6. Date Exercisable and Expiration Date (Month/Day/Year)		ele and unt of orlying rities $\therefore$ 3 and 4)	Derivative I Security S (Instr. 5) I I I I I I I I I I I I I I I I I I I	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr			
				Code V	″ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Repor	rting O	wners												
<b>Reporting Owner Name / Address</b>				Relationships										
			Dir	rector 10%	6 Owner	Officer	C	Other						
DAVIDSON SPENCER GENERAL AMERICAN INVESTORS CO INC 100 PARK AVENUE - 35TH FLOOR NEW YORK, NY 10017				President & CEO										
Signa	tures													
/s/Spence Davidson		12/22/201	0											
<u>**</u> Signat Reporting	Person	Date												
Evola	nation	of Respo	neaet											

## **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).

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(1) Held by the Hudson Partnership of which Spencer Davidson is the General Partner and in which he has a 94% interest.

(2) By various Trusts of which the undersigned is Trustee. The undersigned disclaims any beneficial interest in these shares.

(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 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.