Edgar Filing: General Moly, Inc - Form 4

| General Moly, Inc Form 4 OMB APPROVAL FORM 4 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 OWNERSHIP OF SECURITIES MB //////////////////////////////////// | | | | | | | | | | | |
|--|--------------------------------|--|---|-------------|-----|------------------|--|---|---|--|--|
| (Print or Type l | Responses) | | | | | | | | | | |
| Zang Daniel G Symbol | | | Name and Ticker or Trading Moly, Inc [GMO] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | (First) (Middle) | | 3. Date of Earliest Transaction | | | | (Check all applicable) | | | | |
| (Month/Da C/O GENERAL MOLY, INC., 1726 01/02/20 COLE BLVD., SUITE 115 | | | | | | | Director 10% Owner X Officer (give title Other (specify below) Controller & Treasurer | | | | |
| (Street) 4. If Amer Filed(Mon | | | | te Original | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| | | | | | | | Person | | | | |
| (City) | (State) (Zip) | | e I - Non-D 3. | | | - | uired, Disposed of | | - | | |
| 1.Title of Security (Instr. 3) | (Month/Day/Year) Execution any | Transaction Date 2A. Deemed fonth/Day/Year) Execution Date, if any (Month/Day/Year) | | | | quired of (D) | SecuritiesForm: DirectBeneficially(D) orOwnedIndirect (I)Following(Instr. 4)ReportedTransaction(s) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | | |
| Common Stock | 01/02/2009 | | Р | 10,000 | А | \$ 1.29 | 10,000 | Ι | By IRA | | |
| Common Stock | 01/02/2009 | | Р | 5,000 | А | \$ 1.3 | 15,000 | Ι | By IRA | | |
| Common Stock | | | | | | | 15,000 | D | | | |
| Common Stock | | | | | | | 500 | Ι | By custodial account for daughter | | |

Edgar Filing: General Moly, Inc - Form 4

| Common Stock | 300 | Ι | By son |
|---|----------------|---|--------|
| Reminder: Report on a separate line for each class of securities beneficially owned directly of | or indirectly. | | |

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 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | Securities | 3 | Date | 7. Titl Amou Under Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne |
|---|---|---|---|--|---|---------------------|--------------------|---|------------------------------|---|--|
| | Security | | | | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | Amount | | Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|------------------------|-----------|----------|-------|--|--|--|--|
| I G G G G G G G G G G G G G G G G G G G | Director | 10% Owner | Officer | Other | | | | |
| Zang Daniel G C/O GENERAL MOLY, INC. 1726 COLE BLVD., SUITE 115 LAKEWOOD, CO 80401 | Controller & Treasurer | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Jennifer A. D'Alessandro, as attorney-in-fact | | 01. | /05/2009 | | | | | |
| ** 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).

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.