Edgar Filing: General Moly, Inc - Form 4

General Mol	y, Inc												
Form 4													
January 02, 2	2014												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSIO									OMB APPROVAL				
UNITED STATES SECURITIES AND EACHANGE COMMISSION								ONID	3235-0287				
Check thi	is box		Was	hington,	D.C. 205	549			Number:	January 31,			
if no longer									Expires:	2005			
subject to										Estimated average			
Section 1 Form 4 o		SECURITIES							burden hours per response 0.5				
Form 5		pursuant to	Section 16	5(a) of the	e Securiti	es Ez	xchan	pe Act of 1934.	response	0.5			
obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section													
<i>See</i> Instruction 30(h) of the Investment Company Act of 1940													
1(b).													
(Print or Type F	Responses)												
1 1 1	11 (D	·' D *						5	(D (' D				
	ddress of Repor	-		er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
			•	Symbol									
			General Moly, Inc [GMO]					(Check all applicable)					
(Last)	(First)	(Middle)		Earliest Tra	ansaction			W D'	100				
				Month/Day/Year) .2/31/2013				_X_ Director 10% Owner Officer (give title Other (specify					
COLE BLVD., SUITE 115				51/2015				below)	below)	· · ·			
COLL DL ((Street)		4 If A	- Jan and Dad	0			(India: dual an I	-:				
		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)							
Filed(Month/Day/Year)						_X_ Form filed by One Reporting Person							
LAKEWOOD CO 80401 — Form filed by M						More than One R	ore than One Reporting						
	(6)							Person					
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned			
1.Title of	2. Transaction (Month/Day/Y	Date 2A. Dee		3.	4. Securi			5. Amount of	6. Ownership	7. Nature of			
Security	on Date, if TransactionAcquired (A) or Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial					
(Instr. 3)						Owned	Indirect (I)	Ownership					
								Following	(Instr. 4)	(Instr. 4)			
						(A)		Reported Transaction(s)					
						or		(Instr. 3 and 4)					
Common				Code V	Amount 5,000	(D)	Price						
Stock	12/31/2013			А	5,000 (1)	А	\$0	1,305,002	D				
SIUCK													

Reminder: Report on a separate line for each class of securities beneficially owned directly 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)

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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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
RUSSELL ROBERT DAVID C/O GENERAL MOLY, INC. 1726 COLE BLVD., SUITE 115 LAKEWOOD, CO 80401	Х								
Signatures									
/s/ Jennifer A. D'Alessandro, as attorney-in-fact		01	/02/2014	Ļ					
** 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).

(1) Represents resignation equity granted to the reporting person in accordance with the terms of the issuer's directors compensation plan.

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.