## Edgar Filing: Sheffield William H - Form 4

Sheffield Wi Form 4	lliam H											
November 08	8, 2018											
FORM	14								PPROVAL			
	UNITED	STATES		RITIES A shington			COMMISSIO	N OMB Number:	3235-0287	7		
Check thi if no long subject to Section 1 Form 4 o Form 5	ger <b>STATEN</b> 6. r	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										
obligation may cont <i>See</i> Instru 1(b).	ns inue. Section 17(	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 30(h) of the Investment Company Act of 1940										
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> Sheffield William H			Symbol	er Name <b>an</b> on Wire &		-	Issuer	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (.	Middle)	<ul><li>Houston Wire &amp; Cable CO [HWCC]</li><li>dle) 3. Date of Earliest Transaction</li></ul>				(Che	(Check all applicable)				
401 QUEENS QUAY WEST, SUITE 104			(Month/ 11/06/2	Day/Year) 2018			_X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
TORONTO	, A6 M5V 2Y2						Person	More than One K	eporting			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned			
	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securiti nAcquired Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(D) Price	(mout o und t)					
Reminder: Rep	ort on a separate line	e for each cl	ass of sec	urities bene	Perso inform requir	ns who res nation cont ed to respo	or indirectly. spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)			

number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pi
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of (M Derivative Security		(Month/Day/Year)	Ionth/Day/Year) (Instr. 8)			Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
STOCK UNIT	(1)	11/06/2018		А	1	1,032		(1)	<u>(1)</u>	COMMON STOCK, \$.001 PAR VALUE	1,032	\$

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
1	Director	10% Owner	Officer	Other				
Sheffield William H 401 QUEENS QUAY WEST SUITE 104 TORONTO, A6 M5V 2Y2	Х							
Signatures								
/S/ CHRISTOPHER M. MICKLAS		11/08/2018						
**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) ISSUED PURSUANT TO THE HOUSTON WIRE & CABLE COMPANY NONEMPLOYEE DIRECTOR'S DEFERRED COMPENSATION PLAN. EACH STOCK UNIT REPRESENTS THE RIGHT TO RECEIVE UPON SETTLEMENT ONE SHARE OF HWCC COMMON STOCK. THE STOCK UNITS WILL SETTLE UPON THE REPORTING PERSON'S TERMINATION OF

SERVICE ON THE BOARD OF DIRECTORS.

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.