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WESCO INTERNATIONAL INC Form 5 January 23 FOR

| January 23, 200 |)7 | | | | | | | | | | |
|--|--|----------------------|--|--|----------------------------------|--|--|--------------------------|--|--|--|
| FORM | | | | | | | OMB AF | PPROVAL | | | |
| Check this bo no longer sub | UNITI x if | ED STAT | ES SECURI Washi | TIES AND ington, D.C | OMB Number: Expires: | 3235-0362 January 31, 2005 | | | | | |
| Form 4 or For 5 obligations | to Section 16. Form 4 or Form 5 obligations may continue. ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | average rs per 1.0 | | | |
| 1(b). | " Filed | pursuant t | o Section 16(a | a) of the Sec | curities Exchang | ge Act of 1934, | | | | | |
| Form 3 Holdi | ngs Section | 17(a) of the | e Public Utili | ty Holding | Company Act o | f 1935 or Section | ı | | | | |
| Reported Form 4 Transactions Reported | | | | | pany Act of 19 | | | | | | |
| 1. Name and Add HALEY ROY | - | ting Person <u>*</u> | Symbol | ne and Ticker NTERNAT | or Trading | 5. Relationship of Issuer (Check | Reporting Pers | | | | |
| (Last) | (First) | (Middle) | 3. Statement (Month/Day, 12/31/200 | /Year) | iscal Year Ended | Director X Officer (give below) | title Othe below) | | | | |
| 225 WEST ST DRIVE, SUIT | | QUARE | | | | CHAI | RMAN & CEO |) | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | 6. Individual or Joint/Group Reporting | | | | |
| | | | | | | (check | applicable line) | 1 | | | |
| PITTSBURGH | H, PA 1 | 5219 | | | | _X_ Form Filed by C | | | | | |
| | | | | | | Form Filed by M Person | | eporting | | | |
| (City) | (State) | (Zip) | Table I | - Non-Deriva | ntive Securities Ac | quired, Disposed of, | , or Beneficial | ly Owned | | | |
| 1.Title of Security | | on Date 2A | | 3. Transaction | 4. Securities Acquired (A) or | 5. Amount of Securities | 6. Ownership | 7. Nature of Indirect | | | |

| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and | Ownership Form: | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|---|---|---|-----|---|--------------------|---|---|
| | | | | Amount | (D) | Price | 4) | | |
| WESCO International Common Stock | 12/19/2006 | Â | G | 8,000 | D | \$0 | 982,845 | D | Â |

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

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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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. of D S B O E I S Fi (I |
|---|---|---|---|---|---|---------------------|--------------------|-------|--|---|---|
| | | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | | Relationships | ps | | |
|---|----------|-----------|----------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| HALEY ROY W 225 WEST STATION SQUARE DRIVE, SUITE 700 PITTSBURGH, PA 15219 | Â | Â | CHAIRMAN & CEO | Â | | |

Signatures

**Signature of

/s/Roy W. Haley 01/23/2007

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 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.