

GABELLI GLOBAL MULTIMEDIA TRUST INC
 Form 4
 December 02, 2005

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549

OMB APPROVAL
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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

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 Responses)

1. Name and Address of Reporting Person *
 GABELLI MARIO J

2. Issuer Name and Ticker or Trading Symbol
 GABELLI GLOBAL MULTIMEDIA TRUST INC [GGT]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 C/O GABELLI ASSET MANAGEMENT INC, ONE CORPORATE CENTER

3. Date of Earliest Transaction (Month/Day/Year)
 11/30/2005

Director 10% Owner
 Officer (give title below) Other (specify below)

(Street)
 RYE, NY 10580

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 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) | 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 Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------|--------------------------------------------|
| | | | Code | V | Amount or Price | | |
| Common Stock, Par Value \$0.001 | 11/30/2005 | | P | | 3,000 A \$ 10.23 | 3,476 | I GAMCO Investors, Inc. ⁽¹⁾ |
| Common Stock, Par Value \$0.001 | 12/01/2005 | | P | | 3,000 A \$ 10.358 | 6,476 | I GAMCO Investors, Inc. ⁽¹⁾ |
| Common Stock, Par | | | | | | 209,828.29 | D |

| | | | | |
|------------------------------------------|---------|---|-------------------------------------------|--|
| Value \$0.001 | | | | |
| Common Stock, Par Value \$0.001 | 8,286 | I | Limited Partnership <u>(2)</u> | |
| Common Stock, Par Value \$0.001 | 105,512 | I | Gabelli Securities, Inc. <u>(3)</u> | |
| Common Stock, Par Value \$0.001 | 169,263 | I | GGCP, Inc. <u>(4)</u> | |

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.

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(9-02)

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) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Trans (Instr |
|-----------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------|
| | | | | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| | | | | | | Code | V | (A) | (D) |

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

GABELLI MARIO J
C/O GABELLI ASSET MANAGEMENT INC
ONE CORPORATE CENTER
RYE, NY 10580

X

GAMCO INVESTORS, INC. ET AL
ONE CORPORATE CENTER X
RYE, NY 10580

GGCP, INC.
140 GREENWICH AVENUE X
GREENWICH, CT 06830

Signatures

/s/ James E. McKee as Attorney-in-Fact for Mario J.
Gabelli

12/02/2005

 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) These shares are owned by GAMCO Investors, Inc. The other reporting persons have less than a 100% interest in this entity.
- (2) The shares reported are the total shares owned by this entity. Mr. Gabelli has less than a 100% interest in this entity and the other reporting persons have no interest in this entity.
- (3) The shares reported are the total shares owned by this entity. The reporting persons have less than a 100% interest in this entity.
- (4) These share are owned by GGCP, Inc. Mr. Gabelli has less than a 100% interest in this entity and GAMCO Investors, Inc. has no interest in this entity.

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.