GENERAL DYNAMICS CORP

08/08/2014

Common

Stock,

Form 4

February 10, 2015

FORM	ЛД								OMB AF	PPROVAL
	UNITED	STATES					GE CO	OMMISSION	OMB Number:	3235-028
Check t if no lor subject Section Form 4 Form 5 obligation may cor See Inst 1(b).	states states	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 20(b) of the Investment Company Act of 1940							Expires: January 3 Estimated average burden hours per response 0	
(Print or Type	Responses)									
1. Name and Geiger Jeff	Address of Reporting Trey S	Person *	Symbol		d Ticker or Tra			5. Relationship of lessuer (Check	Reporting Pers	
	ERAL DYNAMIC ATION, 2941 FAI			f Earliest T Day/Year) 2014	ransaction			Director _X Officer (give below)		Owner er (specify
FALLS CH	(Street) HURCH, VA 2204	.2-4513		endment, D nth/Day/Yea	ate Original r)		<i>F</i> –	 Individual or Joi Applicable Line) X_ Form filed by O Form filed by Mo 	ne Reporting Pe	rson
(City)	(State)	(Zip)	Tah	le I - Non-l	Derivative Sec	uritie		Person ired, Disposed of,	or Beneficial	lv Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/E	ned n Date, if	3.		Acquir of (D)	_	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)
Common Stock, \$1.00 par value	02/06/2015			A	1,734.118 (1)	A	\$ 0	39,062.257	D	
Common Stock, \$1.00 par value	05/09/2014			A	19.243 (2)	A	\$ 0	39,081.5	D	

A

18.68 (2) A \$ 0 39,100.18 D

\$1.00 par value								
Common Stock, \$1.00 par value	11/14/2014	A	15.282 (2)	A	\$ 0	39,115.462	D	
Common Stock, \$1.00 par value	02/06/2015	A	15.696 <u>(2)</u>	A	\$ 0	39,131.158	D	
Common Stock, \$1.00 par value						842	I	Owned by Spouse
Common Stock, \$1.00 par value						151.251 (3)	I	401(k) Plan

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. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transact Code (Instr. 8)	5. ionNumber 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)	
				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			

Reporting Owners 2

Geiger Jeffrey S C/O GENERAL DYNAMICS CORPORATION 2941 FAIRVIEW PARK DRIVE FALLS CHURCH, VA 22042-4513

Vice President

Signatures

L. Neal Wheeler, by Power of Attorney

02/10/2015

**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).
 - Represents additional performance restricted stock units (PRSUs) equal to accrued dividend equivalents on PRSUs originally granted in
- (1) 2014 and additional units that were earned based on satisfaction of the performance metric, which was returned on invested capital. The PRSUs are subject to an additional three-year time-vesting period.
- (2) Represents accrued dividend equivalents on PRSUs originally granted in 2013.
- (3) Includes share activity under General Dynamics 401(k) plan since date of reporting person's last ownership report.

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.

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