Edgar Filing: AQUA AMERICA INC - Form 4

AQUA AMI	ERICA INC										
Form 4	016										
March 01, 20									OMB AF	PROVAL	
FORM	UNITED	STATES					NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may cont See Instr 1(b).	Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940						January 31, 2005 Estimated average burden hours per response 0.5				
(Print or Type]	Responses)										
			2. Issuer Name and Ticker or Trading Symbol AQUA AMERICA INC [WTR]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	/liddle)	3. Date of Earliest Transaction					(Check	eck all applicable)		
(Me				Month/Day/Year))2/27/2016				Director 10% Owner X Officer (give title Other (specify below) below) Chief Operating Officer			
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BRYN MA	WR, PA 19010							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acq	uired, Disposed of	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, any (Month/Day/Year)		n Date, if	Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
G				Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock	02/27/2016			А	2,585 (1)	А	\$ 0	6,748.53 <u>(2)</u>	D		
Common Stock	02/27/2016			F	1,280 (3)	D	\$ 31.135	5,468.53	D		
Common Stock 401k								1,607.46 (4)	Ι	401k	

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

Edgar Filing: AQUA AMERICA INC - Form 4

number.

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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amou Under Secur	tle and unt of rtlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
Repo	rting C	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
FOX RICHARD SCOTT 762 W. LANCASTER AVENUE BRYN MAWR, PA 19010			Chief Operating Officer				
Signatures							
/s/ Brian Dingerdissen, attorney-in Mr. Fox	-fact for		03/01/2016				
<u>**</u> Signature of Reporting Person			Date				
Explanation of Responses:							

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 acquisition of shares upon the earning and vesting of performance-based share units awarded on 02/27/2013. Represents vesting at 137.9% of target.
- (2) Includes additional shares acquired under the Issuer's Employee Stock Purchase Plan since the date of the reporting person's last ownership report.
- (3) Disposition to issuer for tax obligations upon the vesting of restricted stock units and performance-based units.
- (4) Includes additional shares acquired under the Company's 401k plan since the last filing.

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.