Edgar Filing: Ruff Ellen T - Form 4

Ruff Ellen T

Form 4 October 05, 2	2017									
FORM				OMB APPROVAL						
-	UNITED	STATES S		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or				GES IN SECUR		ICIA	AL OWN	ERSHIP OF	Expires: Estimated a burden hour response	0
Form 5 obligations may continue. See Instruction 1(b). 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 I	Responses)									
1. Name and Address of Reporting Person *2. IssuerRuff Ellen TSymbol			er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			AQUA	AMERIC	A INC [WTI	R]	(Check	c all applicable)
762 W. LANCASTER AVE (Month/E 09/30/2 (Street) 4. If Ame			of Earliest Transaction Day/Year) 2017 endment, Date Original onth/Day/Year)				X Director 10% Owner Officer (give title Other (specify below) 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	arity (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	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)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock	10/03/2017			А	566	А	\$ 33.155	24,361	D	

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	ionNumber Expiratio of (Month/E		5	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	<i>,</i>	nd 5) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Ruff Ellen T 762 W. LANCASTER AVE BRYN MAWR, PA 19010	Х								
Signatures									
/s/ Brian Dingerdissen, attorney Ms. Ruff	or	10/04/2017							
<u>**</u> Signature of Reporting Po	erson			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 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.