Edgar Filing: YORK WATER CO - Form 4

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| Form 4 | | | | | | | | | | |
|--|---|---|---|---|--------|--------------|---|---|---|--|
| January 15, 1 FORN | 14 UNITED | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | |
| Check th if no lon subject to Section 1 Form 4 of Form 5 obligation may con See Instr 1(b). | ger o 16. or Filed pur ons tinue. | 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 | | | | | | | Expires:January 31, 2005Estimated average burden hours per response0.5 | |
| (Print or Type) | Responses) | | | | | | | | | |
| GANG MICHAEL W Symbo | | | uer Name and Ticker or Trading I K WATER CO [yorw] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (| | | 3. Date of Earliest Transaction(Month/Day/Year)01/15/2015 | | | | X_Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | | | nendment, Date Original fonth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| | 17401-1219 | | | | | | Person | ore than One Re | porung | |
| (City) | (State) | (Zip) Ta | ble I - Non- | Derivative | Secu | rities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | 4. Securit on(A) or Di (Instr. 3, Amount | sposed | d 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 | 01/15/2015 | | Р | 61.67 | А | \$ 23.877 | 10,418.823 | 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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transactio | 5. onNumber | 6. Date Exerce Expiration Date | | 7. Title and Amount of | 8. Price of Derivative | 9. Nu Deriv |
|---------------------------|---|---|------------------|--------------------|---|-----------------------------------|--------------------|--|------------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (Hondy Day) (Cal) | (Month/Day/Year) | Code (Instr. 8) | of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | | Underlying Securities (Instr. 3 and 4) | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | |
|---|------------|------------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| GANG MICHAEL W 130 EAST MARKET STREET YORK, PA 17401-1219 | Х | | | |
| Signatures | | | | |
| Bonnie J. Rexroth, Assistant Sec Attorney | 01/15/2015 | | | |
| **Signature of Reporting | | 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.