FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person [*] DEBENEDICTIS NICHOLAS | | | | | AQ | 2. Issuer Name and Ticker or Trading Symbol AQUA AMERICA INC [WTR] | | | | | | | | | | ip of Reportir plicable) ctor | ng Perso | on(s) to 10% C | |
|--|--|--|-----------------|--|-----------------|--|--|---|------|---|--------|--|---------|--------------------------|---|---|---|---|--|
| (Last) (First) (Middle) 762 W LANCASTER AVE. | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2016 | | | | | | | | | | Offic belo | er (give title w) | | Other below) | (specify | |
| /02 W LANCASTER AVE. | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) | . Individual or Joint/Group Filing (Check Applicable ine) | | | | |
| (Street) | | | | | | | | | | | | | | Χ | Form | n filed by One | e Repor | ting Pers | son |
| BRYN M | YN MAWR PA 19010 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) (Z | Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/* | | | | /Year) i | Execution Date, | | | 3. Transaction Code (Instr. 8) | | | | | | Secur | ficially d | 6. Own Form: (D) or Indirec (Instr. | Direct | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pric | e | Repo Trans | oorted nsaction(s) str. 3 and 4) | | ., | (|
| Common Stock 09/30/20 | | | | | 016 | 16 | | | Α | | 609 | A | \$30 | \$30.765 | | 33,195.79 | | D | |
| | 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) | Execu if any | eemed Ition Date, th/Day/Year) | Code (Ir | ransaction ode (Instr. | | mber rities ired r osed) (D) | | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amoun or Number of Title Shares | | of Der Sec (Ins | Price ivative urity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Dir or I (1) (4) | nership m: ect (D) Indirect Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

/s/ Brian Dingerdissen,

attorney-in-fact for Mr. DeBenedictis 10/03/2016

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 * 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.

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 Number.