### Edgar Filing: SJW CORP - Form 4

SJW CORP Form 4 September 1	9, 2014												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL			
	• • UNITED	STATES						NGE	COMMISSIO	•	/IB mber:	3235-028	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT OF CHANGES I SEC Filed pursuant to Section 16(a) of Section 17(a) of the Public Utility H					gton, D.C. 20549 S IN BENEFICIAL OWNERSHIP OF CCURITIES of the Securities Exchange Act of 1934, Holding Company Act of 1935 or Section ment Company Act of 1940						Expires:January 3 200Estimated average burden hours per response0		
1(b).													
(Print or Type I	Responses)												
ARMSTRONG KATHARINE Symbol						Ticker or	Tradi	ng	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (I								eck all applicable)				
(Mo				3. Date of Earliest Transaction Month/Day/Year) 09/17/2014					X_ Director 10% Owner Officer (give title Other (specify below) below)				
AUSTIN, T	(Street) X 78701		4. If Ame Filed(Mor			-	1		6. Individual or Applicable Line) _X_ Form filed by Form filed by Person	y One Re	eporting	Person	
(City)	(State)	(Zip)	Tabl	o I Nor	• D	onivotivo	Soone	itios A o		of on D	Ponofiai	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	-	ed Date, if	3. Transac Code (Instr. 8	etio 3)		ties A spose	cquired d of	quired, Disposed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Owner	rship Direct ct (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/17/2014			Р		1,116	А	\$ 27.5	3,402 (1)	D			
Common Stock								27.0	1,381	Ι		By Katharine Armstrong as Trustee for the Katharine Armstrong Love Exempt Trust U/A/E 6/30/2009	

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title a	ınd	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlyi	ing	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es -	(Instr. 5)	Bene
	Derivative		-		Securities			(Instr. 3	and 4)		Owne
	Security				Acquired						Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									mount		
									mount		
						Date	Expiration	Of			
						Exercisable	Date	Title N			
								of			

Code V (A) (D)

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationsh						
	Director	10% Owner	Officer	Other				
ARMSTRONG KATHARINE 919 CONGRESS AVENUE #1400 AUSTIN, TX 78701	Х							
Signatures								
/s/ Suzy Papazian Attorney-in-Fact t Armstrong	rine	0	9/18/2014					

## **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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).

Includes 1,116 shares of the Issuer's common stock, 1,000 shares of the Issuer's common stock held under an IRA account and 1,286 shares of the Issuer's common stock underlying restricted stock units. Each restricted stock unit will entitle the reporting person to receive

Date

(1) one share of the Issuer's common stock when that unit vests. The units will vest in full upon the reporting person's continuation in Board service through the day immediately preceding the date of the Issuer's 2015 annual shareholders meeting, subject to accelerated vesting under certain prescribed circumstances.

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.

Shares