FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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

	d Address of Amy B.	Reporting Person*		2. Issuer Name <b>and</b> Ticker or Trading Symbol  MIDDLESEX WATER CO [ MSEX ]									Relationshi neck all app X Direc	olicable)	g Person(s) to I				
(Last) 1500 RO			3. Date of Earliest Transaction (Month/Day/Year) 05/12/2014									Offic belo	er (give title w)	Other below	(specify )				
(Street) ISELIN (City)	NJ (St		08830 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									e) X Forr Forr	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			Code (Instr.   5)						I Secur Benef Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A (D	) or )	Price		action(s) 3 and 4)		(Instr. 4)	
Common	05/09	/2014	2014		P		250		A	\$20.0	)8	3,088	D						
		Та									sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transa Code ( 8)		of		6. Date E Expiratio (Month/D	n Date	9	and 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			3. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

s/Jay L. Kooper, Power of Attorney for Amy B. Mansue

05/12/2014

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.