SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See
Instruction 1(b).

Common Stock (Restricted Stock

Common Stock (DRP Certificate Form)

Common Stock (Shares Held in Street

06/14/2010

Certificate Form)

Name)

Name)

Name)

Name)

Common Stock (DRP)

Common Stock (DRP)

Common Stock (DRP)

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

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burg	len									
hours per response.	05									

1,500

14,833

7,569

1,500

2,264

500

1,248

500

500

\$15.06

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Custodial Account Spouse

Daughter, Molly O'Connor Custodial Account Spouse

for

for

Daughter, Molly O'Connor Custodial Account Spouse

for Son, Alexander O'Connor Custodial Account

Spouse

for Son, Alexander O'Connor Account in the

name of

spouse, Susan O'Connor

1. Name and Address of Reporting Person* OCONNOR A BRUCE				2. Issuer Name and Ticker or Trading Symbol <u>MIDDLESEX WATER CO</u> [MSEX]							elationship of Report ck all applicable) Director Officer (give title	10%	Owner	
(Last) 32 BUCKINGH	(First) IAM WAY	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/16/2010							below)	sident & CFO	'	
(Street) FREEHOLD (City)	NJ (State)	07728-31 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	ndividual or Joint/Group Filing (Check Applicable e) X 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													
Date			2. Transactio Date (Month/Day/Y	Year) i	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock Entry)	(Restricted Stock	Book									6,169	D		

Р

1,000

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Ta Date (Month/Day/Year)	Bie Prenderiva Execution Date, if any (e.g., p (Month/Dav/Year)	titve S Transa Utsole (ecuri ction asls,	tfeSu) of Waliki Secu	Acqu ants, rities	ifeente Disio Expiration Da OptimiDsy/C	esecrof, anvertib	DT BEN Amour ICeSCA Underl	feficiall it of iddities)	BOWNED Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially	10. Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership
1. Title of Derivative Security (Instr. 3)	Derivative EGWERSion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa	4. Transaction Code (Instr.			6. Date Exerc Expiration Da (Month/Day/Y	Perivatiun Anouity Unstr. 3 Security Unstr. 3 Underlying Derivative Security (Instr. 3		8. Price of Derivative Security (Instr. 5)	PWNRHber of Behowitye Beporteds Benefictany(s) (Whited) Following	ุดุธ Indirect GWHestShfp	Instruction of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	Dispo of (D) (Instr. and 5	3, 4)	Date	Expiration	and 4) Title	Amount or Number of		Reported Transaction(s) (Instr. 4)		
Explanation	of Doopono			Coue	•	(A)	(D)	Exercisable	Date	The	Ahitent or				
	of Respons	55.		Code	v	(A)	(D)	Date Exercisable	Expiratic Date		Number <u>1 J. Quini</u> for A. Bi		 <u> </u> 06/16/201	0	

O'Connor

** Signature of Reporting Person Date

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

 \ast 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.