FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|

| <b>STATEMENT</b> | OF CHANGE | S IN BENEFICIAL | . OWNERSHIP |
|------------------|-----------|-----------------|-------------|

| OMB APPROVAL      |           |  |  |  |  |  |  |  |  |
|-------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:       | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average | e burden  |  |  |  |  |  |  |  |  |

0.5

hours per response:

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

| Name and Address of Reporting Person*     Andreasen Christian G. Jr. |   |  | 2. Issuer Name and Ticker or Trading Symbol  MIDDLESEX WATER CO [ MSEX ] |   |                |  |              |                                    |  |                    | (Check all applicab<br>Director<br>V Officer (giv   |  |  | r 10%<br>(give title Oth                       |   | 6 Owner<br>er (specify                                |  |            |
|--|---|--|--|---|----------------|--|--------------|------------------------------------|--|--------------------|---|--|--|--|---|---|--|------------|
| (Last)<br>485C RC<br>SUITE 4   | (Fir<br>OUTE 1 SO   | ,  | Middle)  | 3. Date of Earliest Tran<br>04/01/2020                      |                |  |              | nsaction (Month/Day/Year)          |  |                    |   |  | Delow) below)  VP-Enterprise Engineering   |  |   |   |  |            |
| (Street) ISELIN  | NJ  | 0  | 08830  |   | 4. If <i>i</i> | Amend  | ment, Date ( | of Original Filed (Month/Day/Year) |  |                    |   |  | 6. Individual or Joint/Group Filing (Check Applicabline)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person |  |   |   |  | erson      |
| (City)   | (Sta  |  | Zip)   |   |                |  |              |                                    |  |                    |   |  |  |  |   |   |  |            |
|  |   |  | I - No   |   |                | 1  |              |                                    | I, Dis   | sposed of          | -   |  |  |  |   | I   | 1  |            |
| 1. Title of Security (Instr. 3)                                      |   | 2. Transaction<br>Date<br>(Month/Day/Year) |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                |  |              | Disposed Of                        | s Acquired (A) or<br>f (D) (Instr. 3, 4 and  |                    | nd Sec<br>Ber<br>Ow                                 | Beneficially<br>Owned Following        |  | Form:  | nership<br>Direct<br>Indirect<br>str. 4)                          | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |  |            |
|  |   |  |  |   |                |  |              | Code                               | v  | Amount             | (A) or<br>(D)                                       | Price                                  | Tra  | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |   |   |  | (111511.4) |
| Common Stock (Restricted Stock Book Entry) 04/0                      |   | 04/01/20                                   | 020  |   |                | J  |              | 688                                | A  | \$60.1             | 12  | 2,615                                  |  |  | D   |   |  |            |
| Common   | Stock (Boo  | k Entry)                                   |  |   |                |  |              |                                    |  |                    |   |  |  | 9,7  | '19   |   | D  |            |
| Common Stock (DRP)   |   |  |  |   |                |  |              |                                    |  |                    |   |  | 5,5  | 557  |   | D   |  |            |
| Common Stock (DRP)   |   |  |  |   |                |  |              |                                    |  |                    |   |  | 16   |  | I   |   | Custodial<br>Account<br>for Megan<br>H.<br>Andreasen |            |
|  |   | Tal  | ble II -   |   |                |  |              |                                    |  | osed of, convertib |   |  |  | vne  | t   |   |  |            |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                  | itle of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, or Exercise (Month/Day/Year) if any |  | 4.<br>Transa   | 1. 5. Number of Oracle (Instr. Derivative                   |                | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |              |                                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Insti<br>3 and 4) |                    | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) |  | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4)                    |  | 10.<br>Ownersh<br>Form:<br>Direct (D<br>or Indirec<br>(I) (Instr. | Beneficial<br>Ownership<br>ot (Instr. 4)              |  |            |
|  |   |  |  |   | Code           | v  | (A) (D)      | Date<br>Exerci                     | isable   | Expiration<br>Date |   | Amount<br>or<br>Number<br>of<br>Shares |  |  |   |   |  |            |

**Explanation of Responses:** 

/s/Jay L. Kooper, Power of

Attorney for G. Christian

04/02/2020

**Andreasen** 

\*\* 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.