Edgar Filing: SOUTH JERSEY INDUSTRIES INC - Form 4

| SOUTH JER Form 4 January 12, 2 | RSEY INDUSTRIES | INC | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------|-----------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------|
| FORM | | | | | | NCEO | | OMB AF | PROVAL |
| Check th | UNITED ST | | shington, | | | NGE C | OMMISSION | OMB Number: | 3235-0287 |
| if no long | 1er | | | Expires: | January 31, 2005 | | | | |
| If no longer subject to subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Estimated average burden hours per response 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, 30(h) of the Investment Company Act of 1940 Estimated average burden hours per response | | | | | | | | | verage |
| (Print or Type I | Responses) | | | | | | | | |
| 1. Name and A Kavanaugh | Address of Reporting Pers Thomas S | Symbol | Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | |
| | | INC [SJ | | | | | (Check all applicable) | | |
| (Month/ | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/10/2017 | | | | Director 10% Owner Officer (give title Other (specify below) below) Vice President & Controller | | |
| | (Street) | 4. If Ame | ndment, Da | te Origina | 1 | | 6. Individual or Jo | | |
| FOLSOM | _X_F | | | | pplicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| FOLSOM, 1 | | 、 、 | | | | | Person | | |
| (City) | (State) (Zip | 1 401 | | | | | uired, Disposed of | | - |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) | | | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | |
| So.Jersey Ind., Inc. / Common Stock | 01/10/2017 | | А | 229 | A | \$ 0 | 27,308.199 | D | |
| So.Jersey Ind., Inc. / Common Stock | 01/10/2017 | | F | 17 | D | \$ 33.69 | 27,291.199 | D | |
| So.Jersey Ind., Inc. / Common Stock | | | | | | | 140.0732 | I | UGMA for son |

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| So.Jersey Ind., Inc. / Common Stock | 140.0732 | Ι | UGMA for son |
|----------------------------------------------|-------------------|---|-----------------|
| So.Jersey Ind., Inc. / Common Stock | 9,274.7717 (1) | Ι | 401(k) |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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 Exercisable and | 7. Title and | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|------------|------------|-------------------------|------------------|-------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onNumber | Expiration Date | Amount of | Derivative | Deriv |
| Security | or Exercise | - | any | Code | of | (Month/Day/Year) | Underlying | Security | Secu |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivativ | e | Securities | (Instr. 5) | Bene |
| (| Derivative | | (| (| Securities | | (Instr. 3 and 4) | | Owne |
| | Security | | | | Acquired | | (| | Follo |
| | | | | | (A) or | | | | Repo |
| | | | | | Disposed | | | | Trans |
| | | | | | of (D) | | | | (Instr |
| | | | | | (Instr. 3, | | | | Ì |
| | | | | | 4, and 5) | | | | |
| | | | | | | | A | | |
| | | | | | | | Amount | | |
| | | | | | | | or | | |

| | | | | Date Exercisable | Expiration Date | Title | or Number of |
|------|---|-----|-----|---------------------|--------------------|-------|--------------------|
| Code | V | (A) | (D) | | | | Shares |

Reporting Owners

| Reporting Owner Name / Address | | | Relationships | |
|----------------------------------------------------------------|----------|-----------|-----------------------------|-------|
| 1 | Director | 10% Owner | Officer | Other |
| Kavanaugh Thomas S 1 SOUTH JERSEY PLAZA FOLSOM, NJ 08037 | | | Vice President & Controller | |
| Cignoturoo | | | | |

Signatures

| Thomas | |
|--------------------------------------------|------------|
| Kavanaugh | 01/12/2017 |
| <u>**</u> Signature of Reporting Person | Date |
| Reporting reison | |

Explanation of Responses:

- * 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).
- (1) The shares reported herein as owned indirectly through 401(k) were previously reported as directly owned.

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.