1. Name and Address of Reporting Person*  
** Rousseau David  
(First)  (Middle)  (Last)  
C/O GLOBAL WATER RESOURCES, INC.  
21410 N 19TH AVE, SUITE #220  
PHOENIX  AZ  85027

2. Issuer Name and Ticker or Trading Symbol  
** Global Water Resources, Inc. [ GWRS ]  

5. Relationship of Reporting Person(s) to Issuer  
(10% Owner)  
Director  
Officer (give title below)  
Other (specify below)

3. Date of Earliest Transaction (Month/Day/Year)  
03/29/2019

4. If Amendment, Date of Original Filed  

6. Individual or Joint/Group Filing (Check Applicable Line)  
Form filed by One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Deemed Execution Date, if any (Month/Day/Year)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Average Price</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred Phantom Unit</td>
<td>(1)</td>
<td>03/29/2019</td>
<td>A</td>
<td>1</td>
<td>(2) (2)</td>
<td>$0</td>
<td>D</td>
<td>V (A)</td>
</tr>
</tbody>
</table>

Code V (A) (D) Date Exercisable Expiration Date Title Amount or Number of Shares  
Deferred Phantom Unit (1) 03/29/2019 A 1 (2) (2) Common Stock 1 $0 737 D

Explanation of Responses:
1. Each deferred phantom unit ("DPU") is the economic equivalent to one share of common stock of Global Water Resources, Inc. ("the Company").
2. The DPUs are fully vested upon grant. In addition, the DPUs are only permitted to be redeemed upon the reporting person ceasing to be a director of the Company. Redemption requirements are detailed within the DPU plans which are incorporated by reference within our latest filed 10-K.

Remarks:

/s/ Heather Krupa, attorney-in-fact  04/02/2019  ** Signature of Reporting Person  Date


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.