1. Name and Address of Reporting Person*  
Huckelbridge Brett  
(Last) Brett  
(First)  
(Middle)  
21410 NORTH 19TH AVENUE  
SUITE 220  
(Street)  
(City) PHOENIX  
(State) AZ  
(Zip) 85027

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

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

3. Date of Earliest Transaction (Month/Day/Year)  
01/31/2019

4. If Amendment, Date of Original Filed  

6. Individual or Joint/Group Filing (Check Applicable Line)  
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

1. Title of Security (Instr. 3)  
Deferred Phantom Unit

2. Transaction Date (Month/Day/Year)  
01/31/2019

2A. Deemed Execution Date, if any (Month/Day/Year)  

3. Transaction Code (Instr. 8)  
A

4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  
A

5. Amount of Securities Acquired Following Reportd Transaction(s) (Instr. 3 and 4)  
4

6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)  
D

7. Nature of Indirect Beneficial Ownership (Instr. 4)  

Code V Amount (A) or (D) Price
A 4 $0 1,378

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  
02/04/2019  
** 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).  
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.