

PRIMO WATER CORP /CN/

Reported by WELLS JAY

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/23/17 for the Period Ending 02/21/17

Address 4221 W. BOY SCOUT BLVD.

SUITE 400

TAMPA, FL, 33607

Telephone 813-313-1732

CIK 0000884713

Symbol PRMW

SIC Code 2086 - Bottled and Canned Soft Drinks and Carbonated Waters

Industry Non-Alcoholic Beverages

Sector Consumer Non-Cyclicals

Fiscal Year 12/28



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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Wells Jay								RP/CN	-			Director	Director 10% Owner					
(Last) (First) (Middle)					3.	Date	of Earl	iest Trans	actio	n (MM/D	D/YYYY		Officer (give title below) Other (specify below)					
5519 W. IDLEWILD AVENUE								2/2	1/2	017		CFO						
(Street)					4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)							(Y) 6. Individual of	6. Individual or Joint/Group Filing (Check Applicable Line)				
TAMPA, FL 33634 (City) (State) (Zip)													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
			Table	I - No	n-Dei	rivati			_	red, Dis	posed o	f, or l	Beneficially Own	ed				
1.Title of Security (Instr. 3)				Date 2A. Deem Execution Date, if ar		tion	n (Instr. 8)		de 4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership of Indire Form: Benefic	7. Nature of Indirect Beneficial Ownership		
								Code	V	Amount	(A) or (D)	Price					(Instr. 4)	
Common Shares 2/21/2017				017			F		5885 (1)	D	\$11.32	2 1	110822		D			
Common Shares 2/21/201				017			A		31641 (2)	A	\$0.00	142463		D				
Common Shares 2/21/2017				017			F		13488 (3)	D	\$11.32	128975		D				
	Tab	le II - Der	ivative	Secui	rities]	Bene	ficially	Owned (e.g.	, puts,	calls, wa	arran	ts, options, conve	rtible sec	curities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Dee Execution Date, if	cution (Ins		Acqu Dispo		er of we Securities d (A) or d of (D) 4 and 5)		6. Date Exercisable and Expiration Date			e and Amount of ties Underlying ative Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security				Code	V	(A)	(D)	Dat Exe	e Ercisable	expiration Date		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		

Explanation of Responses:

- (1) Represents the number of common shares withheld to satisfy tax obligations due upon the vesting of time-based restricted share units ("RSUs") granted to the Reporting Person on February 19, 2016.
- (2) Represents performance-based RSUs granted to the Reporting Person on February 13, 2014, which vested on February 21, 2017 as a result of the achievement of the performance criteria.
- (3) Represents the number of common shares withheld to satisfy tax obligations due upon the vesting of performance-based RSUs granted to the Reporting Person on February 13, 2014.

Reporting Owners

1 9							
Panorting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Wells Jay							
5519 W. IDLEWILD AVENUE			CFO				
TAMPA, FL 33634							

Signatures

/s/ Marni Morgan Poe, Attorney-in-Fact 2/23/2017

**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 control number.