FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL |
|---|-------------------------|-----------|
| | OMB Number: | 3235-0287 |
| l | Estimated average burde | en |
| | hours per response: | 0.5 |
| | | |

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

| 1. Name and Address of Reporting Person* GAYLORD CHARLES H JR | | | | | | | 2. Issuer Name and Ticker or Trading Symbol ITRON INC /WA/ [ITRI] | | | | | | | | | | onship of Reporting all applicable) Director | | Person(s) to Issuer 10% Owner | |
|--|--|---|---|-----|--|--|--|---|--|--|-------------|---|------------|------------------------------------|--|---|---|---|----------------------------------|--|
| (Last) 2111 N M | | 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2015 | | | | | | | | | | | | Officer (give title below) | | Other (specify below) | | | | |
| (Street) LIBERTY | ERTY WA 99019 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Indivi ne) X | -/ | | | | on |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of S | Security (Inst | 2. Transaction Date (Month/Day/Year) | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A d Of (D) (Instr. 3, | | | 4 and Se | | ount of ties cially I Following ed | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | ct ect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | Code | v | Amount | () | A) or D) | Price | | Transaction(s) (Instr. 3 and 4) | | | | <u> </u> | | |
| Common | Stock | | 04/01/2015 | | | | A | | 687 | A | | \$ | \$0 14,100 | | 4,100 | D | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | vative Conversion Date irity or Exercise (Month/Day/Year) | | Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of | | ount | nt er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | (D) rect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

MariLyn R. Hill, attorney-infact for Mr. Gaylord

04/01/2015

** 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.