Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| <i>N</i> ashington, | D.C. | 20549 |
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| STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
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| | OMB APP | ROVAL | | | | | | | |
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| | OMB Number: 3235-0287 Estimated average burden | | | | | | | | |
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| | hours per response | 0.5 | | | | | | | |

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* LEYDEN TIMOTHY M | | | | 2. Issuer Name and Ticker or Trading Symbol ITRON, INC. [ITRI] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
|--|--|--|---------|--|------------------------------|---|--|---------------------------|---|--------|---|--|----------------------------|---|--|--|-------------------|--|--|
| LETDEN HMOTHT M | | | | | | | | | | | X | Direc | tor | | 10% O | wner | | | |
| (Last) (First) (Middle) 2111 NORTH MOLTER ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2020 | | | | | | | | Office below | er (give title w) | | Other (below) | specify | |
| (Street) LIBERT | Y WA | A 9 | 9019 | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Ind Line) | ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | on | |
| (City) | (Sta | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - Nor | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | osed of | , or E | Benef | iciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5) | | | | 4 and Securit | | ies cially Following | Form (D) o | vnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | Code | v | Amount | | | (A) (D) | or P | rice | Transa | ction(s) 3 and 4) | | | (11301. 4) | | | | | |
| Common | Stock | | | 07/01/ | /2020 | | | | A | | 496(1) | 96 ⁽¹⁾ A | | \$0 | 11,847 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | med on Date, Day/Year) | 4. Transa Code (8) | | of Deriv | r osed) r. 3, 4 | 6. Date Exercisabl Expiration Date (Month/Day/Year) Date Exp Exercisable Date | | te ear) | r) Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of | | De Se (In | Price of erivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Reflects the grant of common stock independent members of Itron's board of directors receive quarterly as part of their annual compensation for board service.

/s/ Sarah Hlavinka, attorneyin-fact for Mr. Leyden ** Signature of Reporting Person

07/06/2020 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.