FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF (| CHANGES | IN RENE | FICΙΔΙ | OWNERS | ΗΙΡ |
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| STATEMENT | OF (| SHANGES | | FICIAL | OWNERS | ПІГ |

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| | OMB Number: | 3235-0287 | | | | |
| l | Estimated average burde | en | | | | |
| | hours per response: | 0.5 | | | | |
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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* GLANVILLE THOMAS S | | | | | 2. Issuer Name and Ticker or Trading Symbol ITRON INC /WA/ [ITRI] | | | | | | | | (Cł | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|--|--------|------|------------------------------|--|---|-------|--|-----------------|---|---|------------------------|--|---|---|---|--|---|----------|--|
| GLANVILLE THOMAS 5 | | | | | | | | | | | | | | X C | Director | | 10% C | wner | | |
| (Last) (First) (Middle) 2111 N MOLTER ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/09/2012 | | | | | | | | | | Officer (give title pelow) | | | (specify | |
| (Street) LIBERTY LAKE WA 99019 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | (St | ate) (| Zip) | | - | | | | | | | | | | | Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) | | | | | Execution Date, | | Date, | | | | Securities Acquired (A) o sposed Of (D) (Instr. 3, 4 a | | | 5) Se Be | Amount of ecurities eneficially wned Following eported | 6. Owner Form: Dir (D) or Ind (I) (Instr. | rect lirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | v | Amount | (A) (D) | or P | rice | Tr | ransaction(s) nstr. 3 and 4) | | | (1130.4) | | | | |
| Common | Stock | | | 02/09/ | 2012 | 2012 | | | S | | 1,000(2) | D | 1 | \$42.04(1) | | 25,527 | 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) | Derivative Conversion Date Security Or Exercise (Month/Day/Year) Execution Date, if any | | | 4. Transa Code (8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | tr. 3 | 8. Price Derivati Securit (Instr. 5 | ive derivative y Securities | Owne Form Direct or Ind (I) (In: | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | | (A) | (D) | Date Exercis | able | Expiration Date | Nur of Title Sha | | | | | | | | |

Explanation of Responses:

1. Represents weighted average price. Shares were sold in multiple transactions at prices ranging from \$42.00 to \$42.08, inclusive. Reporting person undertakes to provide to the issuer, any shareholder of the issuer, or the SEC, upon request, full information regarding the numer of shares sold at each separate price within the ranges specified.

2. Shares sold pursuant to terms of a 10b5-1 trading plan.

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

02/10/2012

** 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.