## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

KH	IE2	AND	EXCHANGE	COMMISSION

OMB APP	ROVAL
OMB Number:	3235-0287
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0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  GODFREY EDWARD F						2. Issuer Name <b>and</b> Ticker or Trading Symbol UNITIL CORP [ UTL ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)    Director 10% Owner				
(Last) (First) (Middle) 6 LIBERTY LANE WEST						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024									Officer below)	(give title		Other (s below)	pecify
(Street) HAMPTON NH 03842  (City) (State) (Zip)				4. li	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person					
				n-Deriv	ative	Sec	curitie	es Ac	quired, l	Dis	posed o	of. or Be	enefic	iallv	Owne				
1. Title of Security (Instr. 3)  2. Tran Date					action				3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3, Code (Instr. 5)			ed (A) o	r	5. Amou Securitie Benefici	int of es ally Following	Form:	Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	t (A) or (D)		е	Transac	Transaction(s) (Instr. 3 and 4)			msu. 4)
Common stock, no par value 10/01/2					/2024	2024			A <sup>(1)</sup>		1,582	2 A \$6		0.02	13	13,289		D	
		Т							uired, Di , option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year		4. Transactio Code (Inst 8)		on of		6. Date Exe Expiration (Month/Day	Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		S (I	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisable		xpiration ate	Title	Amou or Numb of Share	er					
				Í					(2)	┰	(2)	Common	0						

## **Explanation of Responses:**

- 1. Shares were granted pursuant to the Unitil Corporation Third Amended and Restated 2003 Stock Plan and transferred into my name in connection with the stock portion of my annual retainer fee as a Director of the Company
- 2. Each restricted stock unit is equivalent in value to one share of Unitil Corporation's common stock, no par value ("Common Stock"), and represents the right to receive a combination of cash and Common Stock after separation from service on Unitil Corporation's Board of Directors. Each restricted stock unit is fully vested upon grant and is payable 70% in Common Stock and 30% in cash, based upon the closing price of Common Stock on the day prior to settlement.

/s/ Sandra L. Whitney, attorney-in-fact for Edward F. 10/03/2024 Godfrey

\*\* 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.