FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICE	AL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden 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* <u>ELFNER ALBERT H III</u>					2. Issuer Name and Ticker or Trading Symbol UNITIL CORP [UTL]										lationship k all appl Direct	cable)	ng Per	son(s) to Iss 10% Ov	
(Last) 6 LIBER	(Fi	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/01/2013								Office below	r (give title		Other (specify below)			
(Street) HAMPT (City)		tate)	03842 (Zip)		-				f Original I					Line) X	Form Form Perso	filed by One filed by Mo	e Rep	g (Check Ap orting Perso n One Repo	n
Table I - Nor 1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			or	5. Amou Securiti Benefic	5. Amount of Securities Beneficially Owned Following		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership	
Common stock, no par value									Code	V	Amount	(A) (D)	or Pr	ice	Transac (Instr. 3	tion(s)		D	(Instr. 4)
		Т	able II - I						ired, Di						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (I 8)		n of		6. Date Exe Expiration (Month/Day	Date		e and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		E	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	Code	v	(A)		Date Exercisable		opiration	Title	Amor or Numl of Share	ber					
Restricted	(1)	10/01/2013			A		1,530		(2)		(3)	Common	1,53	30	\$29.43	2,624		D	

Explanation of Responses:

- 1. 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.
- 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.
- 3. 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.

10/02/2013 /s/ Albert H. Elfner, III

** 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.