Edgar Filing: Kochan Shaul - Form 4

| Kochan Shau Form 4 | ıl | | | | | | | | | | |
|---------------------------------------------------------------|---------------------------------------------------|-------------|-----------------------------------|----------------------------------------|-----------------------------------------------|------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------|--|
| June 17, 201 | 0 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | | OMB APPROVAL | | |
| | UNITED | SIAIES | | | D.C. 205 | | GE U | OMINIISSION | OMB Number: | 3235-0287 | |
| Check th | | | • • • • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 0.0.200 | ., | | | Expires: | January 31, | |
| if no long subject to Section 1 Form 4 o | NGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires: 2005 Estimated average burden hours per response 0.5 | | | | | |
| Form 5 obligatio may cont <i>See</i> Instru 1(b). | Filed pur ^{ns} Section 17(a uction | a) of the F | Public U | tility Hold | | pany 4 | Act of | Act of 1934, 1935 or Sectior 0 | | 0.0 | |
| (Print or Type I | Responses) | | | | | | | | | | |
| Kochan Shaul Symbol | | | | r Name and | l Ticker or T | rading | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | | Systems, I | nc. | | (Check all applicable) | | | |
| | SAFE WATER INC., 25 FAIRC | | 3. Date of (Month/E 05/14/2 | - | ransaction | | | Director X Officer (give below) VP-Inter | | Owner r (specify ets | |
| (Street) 4. If Ame | | | 4. If Ame | endment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | |
| PLAINVIE | W, NY 11803 | | Filed(Mor | nth/Day/Year |) | | | Applicable Line) _X_ Form filed by O Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | Derivative S | ecuriti | es Acqu | iired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | 3. Transactic Code (Instr. 8) | 4. Securitie on(A) or Disp (Instr. 3, 4 | oosed o and 5) (A) | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 05/14/2010 | | | S | 100,000 | D | \$ 0.15 | 7,399,500 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | int of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|----------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | | |
|----------------------------------------------------------------------------------|------------|---------------|--------------------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Kochan Shaul C/O PURESAFE WATE 25 FAIRCHILD AVE., S PLAINVIEW, NY 11803 | | | VP-International Markets | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Shaul Kochan | 06/17/2010 | | | | | | | | |
| <u>**</u> Signature of Reporting Person | Date | | | | | | | | |

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.