

SECURITIES AND EXCHANGE COMMISSION

FORM 3

Filing Date: **2013-01-10** | Period of Report: **2013-01-01**
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(HTML Version on secdatabase.com)

REPORTING OWNER

MCTAGGART FREDERICK W.

CIK: **1566233**

Type: **3** | Act: **34** | File No.: **000-25248** | Film No.: **13523150**

Mailing Address

*PO BOX 1114
GRAND CAYMAN E9
KY1-1102*

ISSUER

CONSOLIDATED WATER CO LTD

CIK: **928340** | IRS No.: **000000000** | State of Incorpor.: **E6** | Fiscal Year End: **1231**

SIC: **4941** Water supply

Mailing Address

*TRAFALGAR PLACE, WEST
BAY ROAD, P.O. BOX
GRAND CAYMAN, CAYMAN
ISLANDS, BWI*

Business Address

*TRAFALGAR PL
WEST BAY RD
GRAND CAYMAN BWI CAY
E9 00000
8099474277*

FORM 3

**UNITED STATES SECURITIES AND
EXCHANGE COMMISSION**
Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0104
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**INITIAL STATEMENT OF BENEFICIAL
OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section
17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the
Investment Company Act of 1940

1. Name and Address of Reporting Person <u>MCTAGGART FREDERICK W.</u> (Last) (First) (Middle) <u>PO BOX 1114</u> (Street) <u>GRAND CAYMAN, E9 KY1-1102</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/ Year) <u>01/01/2013</u>	3. Issuer Name and Ticker or Trading Symbol <u>CONSOLIDATED WATER CO LTD [CWCO]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) <u>President and CEO</u>	5. If Amendment, Date Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
<u>Common Stock</u>	<u>124,995</u>	<u>D</u>	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
<u>Option (Right To Buy)</u>	<u>02/22/2012</u> ⁽¹⁾	<u>02/22/2017</u> ⁽¹⁾	<u>Common Stock</u>	<u>35,000</u> ⁽¹⁾	<u>\$10.68</u>	<u>D</u>	

Explanation of Responses:

1. The option vested as to 11,667 shares on February 22, 2012 and vests as to 11,667 shares and 11,666 shares on February 22, 2013 and February 22, 2014, respectively. The option expires as to 11,667 shares on each of February 22, 2015 and February 22, 2016 and expires as to 11,666 shares on February 22, 2017. The exercise price of the option equals the market price of the Company's common stock as of the close of business on the date of grant.

Signatures

/s/ Frederick W. McTaggart

** Signature of Reporting Person

01/10/2013

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.