FORM 4	4
--------	---

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

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respon	ses)											
1. Name and Address Cotton Stephen	2. Issuer Name Aqua Metals, I			rading Sy	/mbol	4	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
1010 ATLANTIC	(First) AVE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/19/2017					r)	X Officer (give title below) Other (specify below) Chief Commercial Officer			
ALAMEDA, CA 9	4. If Amendment, Date 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 Person					
(City)	(State)	(Zip)	Ta	ble I - Nor	n-Dei	rivative S	ecurit	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			d of (D)	Beneficially Owned Following Reported Transaction(s)	Form:	7. Nature of Indirect Beneficial						
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		04/19/2017		S <mark>(1)</mark>		4,415	D	\$ 17.2605 (<u>2)</u>	93,291	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 SEC 1474 (9contained 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, cans, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Nu	mber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	ion	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Deriv	ative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Secur	rities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acqu	ired			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security					(A) o	r			4)			Following	Direct (D)	
						Dispo	osed						Reported	or Indirect	
						of (D	· · · · · · · · · · · · · · · · · · ·						Transaction(s)	< / <	
						(Instr	· · ·						(Instr. 4)	(Instr. 4)	
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director 10% Owner		Officer	Other				
Cotton Stephen 1010 ATLANTIC AVE ALAMEDA, CA 94501			Chief Commercial Officer					

Signatures

/s/ Stephen Cotton	04/20/2017
***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).

(1) The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on February 21, 2017.

The sales price reported in Column 4 of Table 1 represents the weighted average sales price of the shares sold within a range from \$17.11 to \$17.56 per share. Upon (2) request by the Commission Staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price. 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.