FORM	4
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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 Response	s)											
1. Name and Address of Reporting Person <sup>*</sup> AUGUR HARRISON H			2. Issuer Name and Ticker or Trading Symbol PURE CYCLE CORP [PCYO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner			
PO BOX 4389	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/06/2020				Officer (give title below)	Other (specify	below)			
(Street) ASPEN, CO 81611			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)	Tal	ble I - Non	-Der	ivative Se	ecuritie	s Acqu	ired, Disposed of, or Beneficially	Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)	6. Ownership Form:	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		04/06/2020		А		2,500	А	\$ 1.85	54,230 <u>(1)</u>	D		
Common Stock									10,000	I	By Patience Partners, LLC	
Common Stock									46,111	I	By Auginco (2)	
Common Stock									9,940	Ι	By 401(k) Plan	

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 (9-02)

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)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Num	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	)	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	rities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu				4)			0	Direct (D)	
						(A) o							1	or Indirect	
						Dispo							Transaction(s)	· · /	
						of (D	· · · · · · · · · · · · · · · · · · ·						(Instr. 4)	(Instr. 4)	
						(Instr	· · · ·								
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

AUGUR HARRISON H PO BOX 4389 ASPEN, CO 81611	X				
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## Signatures

/s/ Harrison H. Augur, by Mark W. Harding as attorney-in-fact (see remarks)	04/07/2020
-**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) Includes 28,897 shares previously owned indirectly through a 401(k) plan.
- (2) Auginco is a Colorado general partnership that is owned 50% by Mr. Augur and 50% by his wife.

#### **Remarks:**

Pursuant to a power of attorney filed as Exhibit 24 to a Form 4 filed with the Commission on December 14, 2005.

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.