FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | |
|------------------------|-----------|--|--|--|--|
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| hours per response: | 0.5 | | | | |

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

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* DURKIN MARIAN M | | | | | | | 2. Issuer Name and Ticker or Trading Symbol AVISTA CORP [AVA] | | | | | | | | | | ship of Reporti applicable) rector | ing P | 10% Owner Other (specify below) e President | | |
| (Last) (First) (Middle) 1411 E. MISSION AVENUE (MSC-12) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2011 | | | | | | | | | | fficer (give title elow) Senior V | | | | |
| (Street) SPOKAN (City) | POKANE WA 99202 | | | | | | 4. If Amendment, Date of 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 | | | | |
| | | Tabl | e I - No | n-Deriv | /ative | Se | ecuri | ties A | cq | uired, | Dis | posed o | f, o | r Ben | efici | ally Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | ar) | Execut if any | 2A. Deemed Execution Date, f any (Month/Day/Year) | | Transaction | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | (A) or 3, 4 a | nd See Bei Ow | amount of curities neficially ned Following | Fo (D) | Ownership orm: Direct) or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Tra | oorted nsaction(s) str. 3 and 4) | | | (Instr. 4) | | |
| Common | Stock - Res | stricted Shares | | 01/03 | 3/2011 | | | A 3,267 A (1) 26,7 | | | | 26,713 | 26,713 D | | | | | | | | |
| Common | Stock - Res | stricted Shares | | 01/03 | 3/2011 | | | | | F | | 1,002 | 2) | D | \$22 | .78 | 25,722 D | | | | |
| | | Та | | | | | | | | | | sed of, onvertib | | | | y Owne | ed | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, Transact | | | on of tr. De Se Ac (A) Dis of | Number erivative ecurities equired) or sposed (D) estr. 3, 4 d 5) | 6 | Expiratio | ate Exercisable and iration Date nth/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Price Derivativ Security (Instr. 5) | | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) |) (D) | | Date Exercisal | | Expiration Date | Title | or Nui of | ount nber ares | | | | | | |

Explanation of Responses:

- 1. Restricted shares vest in one-third each year over a three-year period and are payable in Avista Corp. Common Stock at the end of the year in the three-year period.
- 2. Shares withheld to pay income tax on Restricted shares which vested.

<u>/s/ Marian M. Durkin</u> <u>01/05/2011</u>

** 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.