FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Sillington, D.C. 20549	OMB APPROVAL
IF	

OWD / W	110071
OMB Number:	3235-028
Estimated average	e burden

0.5

hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person*  SPROWLS ROBERT J						2. Issuer Name <b>and</b> Ticker or Trading Symbol AMERICAN STATES WATER CO [ AWR ]										tionship of Reportin all applicable) Director		10% (	wner
(Last) 630 E FC	(Fi OTHILL E	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/07/2018									X	Officer (give title below)  Preside		below	(specify
(Street) SAN DIN (City)			91773 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivi ine) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
		Tabl	e I - No	on-Deriv	ative	Sec	uritie	s Ac	quired	l, Di	sposed o	f, or	Ben	efici	ally (	Owne	ed		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				A) or s, 4 and	15)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(.	A) or O)	Price	.	Reported Transaction(s) (Instr. 3 and 4)			(30. 7)
Common	Common Shares 03/07/2					018		D		3,979.8	1	D	\$51.51		14,225.589		I	401k	
Common	Shares			03/08/2018 A					412.9145 <sup>(1)</sup> A		\$ <mark>0</mark> .	00	00 14,638.5035		I	401k			
		Та	ble II -								osed of, convertib				y Ov	ned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D			ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exercion Da Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			Deriv Secu	Price of erivative curity str. 5)	9. Number or derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of Sha	nber ares					

## **Explanation of Responses:**

Updated 401k Information

## Remarks:

<u>/s/ Robert J Sprowls</u> <u>03/09/2018</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.