FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 a	nd Address of	Reporting Persor	n*		2. Iss	uer Na	ame a ı	nd Tic	ker or Tr	ading	Symbol						ng Person(s)	to Issuer	
HOLLOWAY ANNE M					AMERICAN STATES WATER CO [AWR]								, I	X Direc	tor		Owner		
(Last) 630 E F0	(Fi DOTHILL I	,	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/23/2023								1	belov	er (give title v)	belo	er (specify w)		
——————————————————————————————————————					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SAN DI	(Street) SAN DIMAS CA 91773														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate)	(Zip)		Rul	Rule 10b5-1(c) Transaction Indication													
					C s	heck t atisfy t	his box he affir	to ind	icate that defense	a tran condit	saction was m ions of Rule 1	nade p 0b5-1	ursua (c). Se	nt to a c ee Instru	ontract, ins	truction or wr	itten plan that i	intended to	
		Table	I - No	on-Deriva	tive S	ecui	ities	Acc	quired,	Dis	posed of	, or	Ben	eficia	ally Owr	ned			
				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			3, 4 and Securi Benefi Owned		cially I Following	6. Ownership Form: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership		
						Code	v	Amount	(A)) or)	Price		ted action(s) 3 and 4)	(Instr. 4)	(Instr. 4)				
Common Shares				08/15/20	22				A		78.3341 ⁽¹⁾) 1	A	\$90.5	1 38,4	38.0776	D		
Common Shares 13			11/15/20)22				A		74.8915 ⁽²⁾) /	A	\$93.17 38,		12.9691	D			
Common Shares 02/02/			02/02/20)23			D		0.474(3)	I	D	\$0.00	38,5	38,512.4951					
Common Shares 02/21				02/21/20	023				A		80.492(4)	1	A	\$93.1	7 38,5	38,592.9871			
Common Shares				05/19/2023				A		86.6878 ⁽⁵	5) A \$		\$86.8	38,679.6748		D			
Common Shares 05/23/20)23			A		448.1793	1	A	\$89.2	5 39,1	27.8541	D		
		Ta	ble II	- Derivativ (e.g., pu							osed of, convertib					ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	n Date Exe e (Month/Day/Year) if a		Deemed ution Date, / th/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion D		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 an		id 4)	B. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)	
	Co		Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount mber ires							

Explanation of Responses:

- 1. DER Units credited on 08/15/2022 as dividend at FMV
- 2. DER units credited on 11/15/2022 as dividend at FMV
- 3. Adjustment due to partial share
- 4. DER Units credited on 02/21/2023 as dividend at FMV
- 5. DER Units credited on 05/19/2023 as dividend at FMV

Remarks:

/s/ Anne M Holloway

05/24/2023

** 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.