FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasiiiigton,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL							
OMB Number:	3235-0287							
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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).

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

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1. Name and Address of Reporting Person* Rentfrow Diane D						2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]										k all appli Directo	cable) or	g Per	son(s) to Iss	vner	
(Last) 5550 VI	(F A VALLAR		3. Date of Earliest Transaction (Month/Day/Year) 08/10/2007										below)	r (give title) Vice Presiden		Other (s below) ent	вреспу 				
(Street) YORBA LINDA CA 92887						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind Line)	'					
(City)	(3		(Zip)	. Doriv	rotive			ioo A		ired D			f or D	mofi	دادهاد						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				action	ction 2A. Deemed Execution Date,				Code (Instr. 5)			red (A)	A) or 5. Amount of		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	,	Amount	unt (A) or (D)		ice	Transaction(s) (Instr. 3 and 4)				(11311.4)	
Common Stock 08/06				6/2007	2007			A		395 A \$		0.00	1,135.9401			D					
		7	able II -										, or Ber ble sec			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution	Date,		Transaction Code (Instr.		vative urities uired or cosed o) tr. 3, 4 5)	6. Date Exercisab Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		1 9	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat	te ercisable		expiration pate	Title	Amo or Num of Shar	ber						
Employee Stock Option (right to	\$38.85	08/06/2007			A			1,776		(1)	08	/05/2017	Common	1,7	76	\$38.85	4,776		D		

Explanation of Responses:

1. The option vests in 3 annual installments of 33%, 33% and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares subject to the option beginning August 5, 2008 and 34% of the number of shares and 300 and 300

/s/ Diane D. Rentfrow

08/10/2007

** 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.