FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|-------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burde | en | | | | | | | | |
| 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 | | | | | | | | | |
|--|---|--|--|--|--|----|----------|--|---|--------------|--------------------|--|----------------|----------------------------|---|--|---------------|--|--|--|
| | nd Address of | | 2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
| SCANLON PATRICK RONALD | | | | | | | [1111] | | | | | | | | | or . (-:: +:+ | | 10% Ov | | |
| (Last) | (F | irst) | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | Officer (give title below) | | Other (specify below) | | | | |
| 175 LIL | AC LANE | 01/ | 01/03/2005 | | | | | | | | | Vice President | | | | | | | | |
| | | 4. If | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | | |
| (Street) BREA | , | | | | | | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | |
| | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | City) (State) (Zip) | | | | | | | | | | | | | | r ersor | | | | | |
| | | Tab | le I - Nor | ı-Deriv | ative | Se | curitie | s Ac | quired | , Dis | sposed | of, or E | Bene | ficial | ly Owned | t | | | | |
| Da | | | | | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (Instr. | | | | | Benefici Owned I | es ally Following | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount | (A | or | Price | Transac | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transa Code (I 8) | | n of | | 6. Date Exercisal Expiration Date (Month/Day/Year | | е | 7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Ni of | umber | | | | | | |
| Common | \$25.92 | 01/03/2005 | | | Α | | 2,995 | | 01/03/20 | 06 | 01/02/2015 | Commo | n 2 | ,995 | \$25.92 | 2,995 | | D | | |
| Common | \$25.92 | 01/03/2005 | | | Α | | 2,995 | | 01/03/20 | 07 | 01/02/2015 | Commo | n 2 | ,995 | \$25.92 | 5,990 | | D | | |
| Common | \$25.92 | 01/03/2005 | | | Α | | 3,085 | | 01/03/20 | 08 | 01/02/2015 | Commo | n 3 | ,085 | \$25.92 | 9,075 | | D | | |

Explanation of Responses:

/s/ Patrick R. Scanlon

01/03/2005

** Signature of Reporting Person

Date

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

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.

^{*} 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).