FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL
OWNERSHIP

OMB APPR	OVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Form 3 Holdings Reported.

Instruction 1(b)

Form 4 Transactions Reported.	F	iled pursuant to or Section					ities Excha ompany Ac									
1. Name and Address of Reporting Pe SPROWLS ROBERT J		2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]							Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) 630 E FOOTHILL BLVD 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2005							Year)	X Officer (give title Other (specify below) Sr. Vice President Finance								
(Street) SAN DIMAS CA (City) (State)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
	Table I - Non-Der	ivative Sec	uritie	es Ac	quir	ed, Di	sposed (of, or	Benefici	ally O	wne	d				
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da if any (Month/Day/Y	Code (Inst			4. Securities Acquired (A) or Dispos (D) (Instr. 3, 4 and 5)			or Disposed	5. Amou Securiti Benefic Owned		es ally		ership n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		(S,	, 3,		Amoun	ount (A) or (D)		Price	Iss	Issuer's Fiscal Year (Instr. 3 and		Indirect (I) (Instr. 4)			
Common	12/31/2005		P			837.	5201(1)	A \$30.		945.5347		.5347		I ·	401K	
	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 Security 3. Transacti Date (Month/Day	Execution Date,	4. Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	vative irities ired r osed)	Expiration Date (Month/Day/Year) ities red sed 3, 4		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amoun or Numbe of Title Shares		nt er		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. Updated 401K dividends and employer contributions of Company Stock

/s/ Robert J. Sprowls 02/08/2006

** 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.