### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235		

3235-0287 OMB Number: Estimated average burden 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 Name and A																			
1. Name and Address of Reporting Person* FARROW GLADYS					2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [ AWR ]										all app	licable) tor	g Person(s) to I	Owner	
(Last) 3825 CANF	(Fir	,	(Middle)		3. Date of Earliest Trans 01/31/2017				saction (Month/Day/Year)						X	Officer (give title below)  Vice Pr		Other (specify below) resident	
(Street) PASADENA	A CA	<b>\</b>	91107		4. If Amendment, Date of Origi					tl Filed (Month/Day/Year)					6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(Sta	ate)	(Zip)													reis	OII		
		Tab	le I - No	on-Deriv	ative	Seci	uritie	s Acc	quired	, Dis	sposed o	f, o	r Ben	efici	ally	Owne	ed		
		2. Transaction Date (Month/Day/Year)		Execution Date, ear) if any		3. Transaction Code (Instr. 8)						and 5) Sec Ber Ow		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount		(A) or (D)	Price			action(s) 3 and 4)		(111501.4)		
Common Sha	ares			06/01/	2016				A		13.4109 <sup>0</sup>	(1)	A	\$39	.83	2,3	99.6457	D	
Common Sha	ares			09/01/	2016				A		13.8265	(2)	A	\$38	.85	2,4	13.4722	D	
Common Sha	ares			12/01/	2016				A		13.67230	(3)	A	\$42	.69	2,4	27.1445	D	
Common Sha	ares			12/30/	2016				D		1.6205(4	4)	D	\$ <mark>0</mark> .	00	2,4	25.524	D	
Common Sha	ares			01/31/	2017				A		1,223		A	\$ <mark>0</mark> .	00	3,6	48.524	D	
Common Sha	ares			02/03/	2017				F		244.5267	7(5)	D	\$44	.24	3,4	03.9973	D	
Common Shares		02/03/2017		7		F		173.2615 <sup>(6)</sup> D		D	\$44.24 3,2		30.7358	D					
Common Shares 02/03			02/03/	2017				F		153.646 <sup>(7)</sup>		D	\$44.24 3,0		77.0898	D			
		Ta	able II -					-			osed of, convertib				y Ov	vned			
Security or (Instr. 3) Pri	onversion Exercise ice of erivative ecurity		if any	med on Date, Day/Year)		Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exercion Da Day/Y		Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		Deri	rivative curity str. 5)	9. Number o 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)
evolunation of					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Titl	Nu of	mber ares					

- 1. DER units credited on 6/1/2016 as dividend at FMV
- 2. DER units credited on 9/1/2016 as dividend at FMV
- 3. DER units credited on 12/1/2016 as dividend at FMV
- 4. Adjustment due to partial share
- 5. 558.5351 previously reported RSU's of which 244.5267 were withheld to satisfy tax liability
- 6.395.7550 previously reported RSU's of which 173.2615 were withheld to satisfy tax liability
- 7. 350.9505 previously reported RSU's of which 153.6460 were withheld to satisfy tax liability

## Remarks:

/s/ Gladys Farrow

02/09/2017

\*\* 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.