FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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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 Address of Reporting Person* TANG EVA G						2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Sr. Vice President & CFO						
(Last) (First) (Middle) 630 E FOOTHILLBLVD						3. Date of Earliest Transaction (Month/Day/Year) 02/23/2024														
(Street) SAN DIMAS CA 91773-1207					4. If Amendment, Date of Original Filed (Month/Day/Year) 02/13/2024									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					Rul	Rule 10b5-1(c) Transaction Indication														
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																		
		Table	I - No	on-Deriva	ative S	Secu	rities	Acc	quirec	l, Dis	sposed of	, or E	Benef	iciall	y Own	ed				
1. Title of Security (Instr. 3)				2. Transact Date (Month/Day		Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securition Securities Securition Securition Securition Securition Securition Securities Securition Securities Secur		ies :ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) c	Pri	се	Reporte Transa (Instr. 3	ction(s)			(Instr. 4)	
Common Shares					06/01/2023				Α		7.0247 ⁽¹⁾	A	\$8	38.79 37,439		9.9182(6)	182 ⁽⁶⁾			
Common Shares 09					2023				A		8.0617(2)	A	\$8	84.07 37,		7,447.9799 ⁽⁶⁾		D		
Common Shares 12/01/2					023				A		8.3831(3)	A \$81		31.26	37,456.363 ⁽⁶⁾		I	D		
Common Shares 12/05/)23				A		4.9705(4)	A \$0		37,461.3335(6)		D				
Common Shares 01/16/20)24			D		1.1161 ⁽⁵⁾	D		\$ <mark>0</mark>	37,460.2174 ⁽⁶⁾		I	D		
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)	Execu if any	eemed ution Date, h/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Securities Owned Following Reported Transactio (Instr. 4)	Owne Form Direc or Ind (I) (In	wnership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	er							

Explanation of Responses:

- 1. Der units credited on 06/01/2023 at FMV
- 2. Der units credited on 09/01/2023 at FMV
- 3. Der units credited on 12/01/2023 at FMV
- 4. Updated DRIP
- 5. adjustment due to partial share
- 6. Amending Balance. Previous amount entered was incorrect.

/s/ Eva G. Tang

02/23/2024

** 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.