FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									

37 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

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1. Name and Address of Reporting Person* TANG EVA G						2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]									eck all appl Direct	or		10% Ov	vner
(Last) 1544 MA	(First) (Middle) IANOR GATE DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 01/02/2008									er (give title v) Vice Presi		Other (specify below) dent	
(Street) HACIENDA HEIGHTS CA 91745-3833					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Si	-	(Zip)											<u> </u>					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				action	ar) i	A. Deemed xecution Date, any Month/Day/Year)		3. Transa Code (ction	4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			or 5. Amo 4 and Securit Benefic		int of es ially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	nt (A) or Pr		rice	Transac (Instr. 3	ction(s)			(111311.4)
common 01/02/					2/2008	2008			F		114(1	D \$		37.6	8 1,625.0952			D	
common				01/28	3/2008	3			A		882	A		\$0	60 2,507.0952 D				
		Т	able II -								osed of onverti				Owned				
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/Da	Date,	4. Transa Code (8)		n of		6. Date Ex Expiration (Month/Da	Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		3	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Shar	ber					
Employee stock option (right to	\$34.11	01/28/2008			A		2,887		(2)	O	01/27/2018	commor	2,8	87	\$0	2,887		D	

Explanation of Responses:

- 1.266 previously reported RSU's vested on 1/2/08; of which 114 were withheld to satisfy tax withholding
- $2. \ The option \ vests in \ 3 \ annual installments \ of \ 33\%, \ 33\% \ and \ 34\% \ of \ the \ number \ of \ shares \ subject \ to \ the \ option \ beginning \ January \ 27, \ 2009 \ and \ 34\% \ of \ the \ number \ of \ shares \ subject \ to \ the \ option \ beginning \ January \ 27, \ 2009 \ and \ 34\% \ of \ the \ number \ of \ shares \ subject \ to \ the \ option \ beginning \ January \ 27, \ 2009 \ and \ 34\% \ of \ the \ number \ of \ shares \ subject \ to \ the \ option \ beginning \ January \ 27, \ 2009 \ and \ 34\% \ of \ the \ number \ of \ shares \ subject \ to \ the \ option \ beginning \ January \ 27, \ 2009 \ and \ 34\% \ of \ the \ number \ of \ shares \ subject \ to \ the \ option \ shares \ subject \ to \ shares \ subject \ to \ shares \ subject \ shares \ shares \ subject \ shares \ shares \ subject \ shares \ sh$

01/31/2008

** 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.