FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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* Schickling David R 2. Date of Ever Requiring State (Month/Day/Ye 07/21/2022				Statement //Year)	3. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]						
(Last) 630 E FOO	st) (First) (Middle) DEFOOTHILL BLVD.				Relationship of Reporting Issuer (Check all applicable) Director	Person(s) to 10% Owner		If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing			
(Street) SAN DIMAS	CA	91773	-		X Officer (give title below) Vice President Wat	Other (specify below) er Operation		(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		e Line) by One Reporting by More than One	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. I)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Shares					199.5858	D					
Common Shares					228.9457	I		401k			
Common Shares					69	I	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)				ate	3. Title and Amount of So Underlying Derivative So (Instr. 4)	curity Convers		cise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		ive	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

Remarks:

07/21/2022 /s/ David R. Schickling

** Signature of Reporting Date Person

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 5 (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).