#### AMERICAN STATES WATER CO

Form 4

January 28, 2015

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

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**OMB APPROVAL** 

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * GEDNEY WILLIAM C			2. Issuer Name <b>and</b> Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last) 1021 JASMIN	(First) E STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/26/2015	Director 10% Owner Officer (give title Other (specify below) Vice President
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person
REDLANDS, CA 92374				Form filed by More than One Reporting Person

(City)	(State)	(Zip) Tab	ble I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Ad Transaction Disposed of Code (Instr. 3, 4 and (Instr. 8)			0)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Shares	06/02/2014		Code V A	Amount 30.002 (1)	(D)	Price \$ 29.9	,	D					
Common Shares	09/02/2014		A	29.4471 (2)	A	\$ 32.26	16,929.1987	D					
Common Shares	12/01/2014		A	27.8705 (3)	A	\$ 34.31	16,957.0692	D					
Common Shares	01/26/2015		A	1,147	A	\$ 0	18,104.0692	D					
Common Shares	01/27/2015		A	831.669	A	\$0	11,486.553	I	401k				

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

**SEC 1474** 

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	]
	Derivative				Securities	1		(Instr.	3 and 4)		(
	Security				Acquired						]
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	e Date		of		
				Code V	(A) (D)				Shares		
				Code v	(A) $(D)$				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships
reporting o wher runne, readiess	

Director 10% Owner Officer Other

GEDNEY WILLIAM C 1021 JASMINE STREET REDLANDS, CA 92374

Vice President

### **Signatures**

/s/ William C.

Gedney 01/28/2015

\*\*Signature of Person

\*\*Bignature of Person

# **Explanation of Responses:**

- \* 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).
- (1) DER units credited on 6/2/2014 as dividend at FMV
- (2) DER units credited on 9/2/2014 as dividend at FMV
- (3) DER units credited on 12/1/2014 as dividend at FMV

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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