HOLLOWAY ANNE M

Form 4 May 24, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

55.05

\$ 55

39,610.6196 D

D

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

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

2. Issuer Name and Ticker or Trading

Symbol

1(b).

Shares

Shares

Common

05/23/2018

(Print or Type Responses)

HOLLOWAY ANNE M

1. Name and Address of Reporting Person *

may continue.

See Instruction

				AMERICAN STATES WATER CO [AWR]			CO	(Check all applicable)				
(A)			3. Date of Earliest Transaction (Month/Day/Year) 05/22/2018					_X_ Director 10% Owner Officer (give title below) Other (specify below)				
(Street)				4. If Amendment, Date Original				6.	6. Individual or Joint/Group Filing(Check			
				Filed(Month/Day/Year)				Ap	Applicable Line)			
	SAN DIM	AS, CA 91773						_	_ Form filed by One _ Form filed by More rson			
	(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially							Owned	
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution I any	Execution Date, if TransactiorDisposed of (D) any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) (A) or			d (A) or	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	01/12/2018			D	1.4097 (1)	D	\$0	38,574.34	D		
	Common Shares	02/15/2018			A	83.3458 (2)	A	\$ 53.13	38,657.6858	D		
	Common Shares	05/15/2018			A	81.536 (3)	A	\$ 54.57	38,739.2218	D		
	Common Shares	05/21/2018			A	1,362.3978	A	\$ 55.05	40,101.6196	D		

S

491

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Common Shares	05/23/2018	S	204	D	\$ 55.01	39,406.6196	D
Common Shares	05/23/2018	S	205	D	\$ 55.03	39,201.6196	D
Common Shares	05/23/2018	S	100	D	\$ 55.06	39,101.6196	D

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)

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

Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)			5. orNumber	6. Date Exer Expiration D	ate	7. Titl	int of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	. 3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
					., ,						
									Amount		
						Date	Expiration		or		
						· · · · · · · · · · · · · · · · · · ·	Date	Title	Number		
						Exercisable Date		of			
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
•	Director	10% Owner	Officer	Other				
HOLLOWAY ANNE M 630 E FOOTHILL BLVD. SAN DIMAS, CA 91773	X							

Signatures

Person

/s/ ANNE M 05/24/2018 **HOLLOWAY** **Signature of Reporting Date

Reporting Owners 2

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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) Adjustment due to partial share
- (2) DER Units credited on 02/15/2018 as dividend at FMV
- (3) DER Units credited on 05/15/2018 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.