Instruction 1(b).

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

	OMB APPROVAL											
	OMB Number:	3235-0362										
	Estimated average burden											
-	haura nar raananaa.	1.0										

Form 3		OWNERSHIP								hours per response:					1.0			
Form 4 Transactions Reported. 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* HARRIS MCCLELLAN III					2. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]							heck all app Direc	olicable) ctor	r		10% Owner Other (specify below)		
(Last) (First) (Middle) 3419 VIA LIDO DRIVE PMB#334					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007								X Office below					belov
(Street) NEWPORT BEACH (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date		2. Transaction	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispose					f 5. Amou Securiti Benefic	int of		ership n: Direct	7. Nature of ndirect Beneficial Ownership		
				(monumbay) is	Month/Day/Year) 8)		8)			(A) or (D)	or Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)	
common		03/01/2007			A		6.08	78(1)	A	A \$38.1		3,407.5831		D				
common			06/01/2007			A		6.44	86(2)	A	A \$36.		9 3,414.0317		D			
common			09/01/2007			A		6.0136(3)		A	\$39.06		3,420.0453		D			
common			12/01/2007			A		6.0357(4)		A	\$41.65		3,426.081		D			
common 12/31/2007			12/31/2007			A		19.0183 ⁽⁵⁾		A	\$0		3,445.6194		D			
common 12/31/2007				A		102.8168(6)		D	\$0		5,162.6011		I 40		401k	01k		
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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) or Dispo	vative (Mont urities uired or cosed b) tr. 3, 4		Date Exercisable and opiration Date lonth/Day/Year)		Amo Sec Und Deri Sec and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5) (Instr. 5) (Instr. 4)		e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	of Ind Bene Own (Insti	lature direct eficial ership r. 4)

(A) (D) Exercisable Date

Explanation of Responses:

- 1. DER units credited on 3/1/2007 as dividend at FMV
- 2. DER units credited on 6/1/2007 as dividend at FMV
- 3. DER units credited on 9/1/2007 as dividend at FMV
- 4. DER units credited on 12/1/2007 as dividend at FMV
- 5. DER units credited in Mar. June, Sept. & Dec. 2007 as dividend at FMV $\,$
- 6. Updated personal holdings

/s/ McClellan Harris III 01/30/2008

** Signature of Reporting Person Date

Shares

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

- * 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.