AMERICAN STATES WATER CO

Form 5

January 25, 2008

OMB APPROVAL FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if

OMB 3235-0362 Number:

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

Reported

(Last)

January 31, Expires: 2005 Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL burden hours per OWNERSHIP OF SECURITIES

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b).

response... 1.0

Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported

(Middle)

30(h) of the Investment Company Act of 1940 Form 4

Transactions

1. Name and Address of Reporting Person * SWITZER BRYAN K

(First)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

AMERICAN STATES WATER CO

(Check all applicable)

[AWR]

12/31/2007

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)

Director 10% Owner _ Officer (give title Other (specify

below) below)

Vice President

630 E FOOTHILL BLVD

(Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting

Filed(Month/Day/Year)

(check applicable line)

SAN DIMAS, CAÂ 91773

X Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State)	(Zip) Ta	ble I - Non-D	erivative Secu	rities	Acquired	l, Disposed of, o	r Beneficially	Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities or Disposed of (Instr. 3, 4 and Amount	of (D)		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
common	03/01/2007	Â	A	4.8665 <u>(1)</u>	A		1,576.8479	D	Â
common	06/01/2007	Â	A	5.155 <u>(2)</u>	A	\$ 36.19	1,582.0029	D	Â
common	09/01/2007	Â	A	4.8072 (3)	A	\$ 39.06	1,586.8101	D	Â
common	12/01/2007	Â	A	4.8249 (4)	A	\$ 41.65	1,591.635	D	Â
common	12/31/2007	Â	A	393.6577 (5)	A	\$0	1,733.8184	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 2270 (9-02)

Of D So B O E

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

 Title of 	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	•		Securi	ties	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
	·				(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date	Expiration		or	
						Exercisable	Date		Number	
						Z.i.c. c isuoie	2		of	
					(A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships							
1 0	Director	ctor 10% Owner Officer		Other				
SWITZER BRYAN K 630 E FOOTHILL BLVD SAN DIMAS, CA 91773	Â	Â	Vice President	Â				

Signatures

/s/ Bryan K.
Switzer

**Signature of Reporting Person

O1/25/2008

Date

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 3/1/2007 as dividend at FMV
- (2) DER units credited on 6/1/2007 as dividend at FMV
- (3) DER units credited on 9/1/07 as dividend at FMV
- (4) DER units credited on 12/1/07 as dividend at FMV
- (5) Updated 401K holdings

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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