| FORM 4 | UNI |
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| Check this box if no | |

longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See

Instruction 1(b).

| TED STATES SECURITIES AND EXCHANGE COMMISSION | ſ |
|-----------------------------------------------|---|
| Washington, D.C. 20549 | 1 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

| N | OMB APPROVAL | | | | | | | | |
|---|--------------|---------------------|--|--|--|--|--|--|--|
| | OMB | 3235 | | | | | | | |
| | Number: | 0287 | | | | | | | |
| | Expires: 1 | November 30 2011 | | | | | | | |
| | Estimated | | | | | | | | |
| | burden ho | urs per | | | | | | | |
| | response | . 0.5 | | | | | | | |

(9-02)

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

| (Print or Type Respon | ises) | | | | | | | | | | |
|-------------------------------------|--------------------------------------------|---------------------------------------------------------|---------------------------------------------------------------------------------------|-----------------------------------------------|--------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------|-------|--|
| 1. Name and Address KOEHLER NEIL | | Symbol | 2. Issuer Name and Ticker or Trading Symbol Pacific Ethanol, Inc. [PEIX] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | |
| 400 CAPITOL M | First) (Middle) ALL, SUITE 206 | 0 (Month/Da | 3. Date of Earliest Transaction (Month/Day/Year) 05/14/2007 | | | | | Officer (give titleOther (specify below) below) President & CEO | | | |
| ^{(S} SACRAMENTO, | | 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 Form filed by More than One Reporting Person | | | | |
| (City) (S | State) (Zip) | Table I | - Non-De | rivat | ive Secur | ities A | Acqui | red, Disposed of, or I | Beneficially | Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, any (Month/Day/Yea | Code | TransactionAcquired (A) orCodeDisposed of (D) | | D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) | Beneficial Ownership | | |
| | | Cod | | v | Amount | or (D) | Price | · · · · · | (I) (Instr. 4) | | |
| Common Stock | 05/14/2007 | | S | | 2,912 (1) | D | \$16 | 3,198,627 | D | | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
|-------------|----------------------------------------------------------------|------------------|--------------------|------------|------|--------|-------|------------------|------------|--------|------------|--------------|----------------|-------------|-------------|
| 1. Title of | 2. | 3. Transaction | 3A. Deemed | 4. | 4 | 5. | | 6. Date Exer | rcisable | 7. Tit | tle and | 8. Price of | 9. Number of | 10. | 11. Nature |
| Derivative | Conversion | Date | Execution Date, if | Transactio | on l | Numb | ber | and Expirati | on Date | Amo | unt of | Derivative | Derivative | Ownership | of Indirect |
| Security | or Exercise | (Month/Day/Year) | any | Code | 0 | of | | (Month/Day | /Year) | Unde | erlying | Security | Securities | Form of | Beneficial |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | I | Deriv | ative | | Securities | | (Instr. 5) | Beneficially | Derivative | Ownership | |
| | Derivative | | | | 5 | Secur | ities | | | (Inst | r. 3 and | | Owned | Security: | (Instr. 4) |
| | Security | | | | 1 | Acqui | ired | | | 4) | | | Following | Direct (D) | |
| | | | | | (| (A) o | r | | | | | | Reported | or Indirect | |
| | | | | | I | Dispo | osed | | | | | | Transaction(s) | (I) | |
| | | | | | | of (D) | · | | | | | | (Instr. 4) | (Instr. 4) | |
| | | | | | | (Instr | | | | | | | | | |
| | | | | | 4 | 4, and | 15) | | | | | | | | |
| | | | | | | | | | | | Amount | | | | |
| | | | | | | | | Data | Frainstian | | or | | | | |
| | | | | | | | | | Expiration | Title | Number | | | | |
| | | | | | | | | Exercisable Date | | | of | | | | |
| | | | | Code | V | (A) | (D) | | | | Shares | | | | |

Reporting Owners

| Penerting Owner Name / Address | Relationships | | | | | | | |
|-------------------------------------------------------------------------|---------------|-----------|-----------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | |
| KOEHLER NEIL M 400 CAPITOL MALL, SUITE 2060 SACRAMENTO,, CA 95814 | Х | | President & CEO | | | | | |

Signatures

| /s/ Neil Koehler | 05/15/2007 |
|--------------------------------|------------|
| *Signature of Reporting Person | 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) The sale transaction covered by this Form 4 was made pursuant to a Rule 10b5-1 sales plan dated March 13, 2007.

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.