SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Addr	•		2. Issuer Name and Ticker or Trading Symbol CALIFORNIA WATER SERVICE GROUP							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
McGhee Lynne P					CWT]								Director Officer (give title		10% Owner Other (specify		
(Last) CALIFORNIA	(First)		3. Date of Earliest Transaction (Month/Day/Year) 01/04/2016								X below) below) VP, General Counsel						
1720 N. FIRST STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street)												Form file	d by More	than On	e Reportir	ig Person	
SAN JOSE CA 95112				_													
(City)	(State)	(Z	p)														
		Та	ble I - Non-	Derivative S	ecurities Acq	uired, I	Disp	osed of,	or B	enefi	cially Ow	ned					
Date				. Transaction Date Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a				and 5) Securities Beneficially Following R		6. Own Form: I or Indir (Instr. 4	Direct (D) ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	((A) or (D)	Price	 Transaction(s) (Instr. 3 and 4) 				(1150.4)	
Common Stock 01/0				01/04/2016		F		31 ⁽¹⁾		D	\$23.15	20,585			D		
Common Stock 01/0				01/05/2016		F		37(2)		D	\$23.24	20,548			D		
Common Stock 01/0				01/06/2016		F	F 45 ⁽³⁾ D \$		\$23.51	20,503			D				
					urities Acqui Is, warrants, c							ed					
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. Number of		6. Date Exercisable and 7. Title and Amo		mount of	8. Price of	8. Price of 9. Number of		0.	11. Nature			

1. Title of Derivative Security (Instr. 3)		2. Conversion or Exercise Price of Derivative Security	land from the set	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form:	Beneficial Ownership
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	- Transaction(s) (Instr. 4)			

Explanation of Responses:

1. Represents the number of shares withheld by and surrendered to the Issuer to satisfy the tax withholding obligations that arose in connection with the vesting of the Restricted Stock Award (RSA) Award #282.

2. Represents the number of shares withheld by and surrendered to the Issuer to satisfy the tax withholding obligations that arose in connection with the vesting of the Restricted Stock Award (RSA) Award #267.

3. Represents the number of shares withheld by and surrendered to the Issuer to satisfy the tax withholding obligations that arose in connection with the vesting of the Restricted Stock Award (RSA) Award #237.

Remarks:

<u>/s/ Michelle Mortensen on</u> behalf of Lynne P. McGhee

** Signature of Reporting Person

01/06/2016

Date

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

* 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.