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 Address of Reporting Person* Dean Shannon C (Last) (First) (Middle) 1720 NORTH FIRST STREET | | | | | | Issuer Name and Ticker or Trading Symbol CALIFORNIA WATER SERVICE GROUP [CWT] 3. Date of Earliest Transaction (Month/Day/Year) 11/03/2016 | | | | | | | | | elationship of Reporting Person(s) to Issuer ck all applicable) Director 10% Owne Officer (give title below) VP, Corp Comm & Comm Affairs | | | | specify |
|--|---|--|----------------|--------|----------------------------------|--|--|-----|--|---|--|--|--------------------|---|---|----------------|---|--|---|
| (Street) SAN JOSE (City) | CA (State) | | 95112 (Zip) | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Mividual 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 | | | | | | | | | | | | | | | | | | | |
| Date | | | | | ransaction e nth/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | | ties Acquired (A) or i Of (D) (Instr. 3, 4 au | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | (Instr. 3 and 4) | | | | (11150.4) |
| Common Stock 11/0 | | | | | | 03/2016 | | | F | | 25(1) | | D | \$30.7 | 5,457 | | | D | |
| 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) | Perivative Conversion Date Execution Date | | | ate, 1 | Code (Instr. | | 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 Amou Securities Under Derivative Securi (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti | e s Illy | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | O11(3) | | |

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 #334.

Remarks:

/s/ Michelle Mortensen on behalf of Shannon Dean

11/07/2016

** Signature of Reporting Person

Date

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

 $Note: File three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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.

 $^{^{\}star}$ 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).