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 |
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| - 1 | |
| | 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* McGhee Lynne P (Last) (First) (Middle) | | | | 2. Issuer Name and Ticker or Trading Symbol CALIFORNIA WATER SERVICE GROUP [CWT] | | | | | | | | | tionship of Reporting F all applicable) Director Officer (give title below) | | Person(s) to Issuer 10% Owner Other (spec | | · I |
|--|--|-------------|-------------------------------|--|--|--------|---|-------|---------------|---|------------------|--|---|--|---|--|--|
| (Last) (First) | 3. Date of Earliest Transaction (Month/Day/Year) 02/28/2017 | | | | | | | | | VP, General Counsel | | | | | | | |
| CALIFORNIA WATER SERVICE COMPANY 1720 N. FIRST STREET | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indiv | Individual or Joint/Group Filing (Check Applicable Line X Form filed by One Reporting Person | | | | | |
| (Street) SAN JOSE CA | 95112 | | | | | | | | | | | | | • | • | ne Reportin | g Person |
| (City) (State) | (Zip) | | | | | | | | | | | | | | | | |
| | Table I - | Non-Deri | vative | Se | curitie | s Acqı | uired, [| Disp | osed of, | or I | Benefi | cially Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Tran Date (Month | | | | ar) l | 2A. Deem Execution if any (Month/Da | Date, | Code (Inst | | | | | 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) | |
| | | | | | Code | v | Amount | | (A) or (D) | Price | (Instr. 3 and 4) | | | | (11150:4) | | |
| Common Stock 02/2 | | | | 7 | | | A 2,145 A | | \$36.75 | 20,8 | 20,853 | | D | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Derivative Conversion Date | Exercise (Month/Day/Year) if any (Month/Day/Year) (Month/Day/Year) | ion Date, T | ate, Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable ar Expiration Date (Month/Day/Year) | | te | nd 7. Title and Am Securities Und Derivative Secu (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(| ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Explanation of Responses | | | | | | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | 311(3) | | | | |

lanation of Responses:

Restricted stock granted 2/28/2017 pursuant to the California Water Service Group equity incentive plan in a transaction exempt under Rule 16-b-3. RSA vests with one-third on February 28, 2018, with the remaining 2/3 vesting quarterly over the succeeding 24 months.

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

03/02/2017

** Signature of Reporting Person

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.