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

| Name and Address of Reporting Person*     McGhee Lynne P                                     |         |                  |  |  | 2. Issuer Name and Ticker or Trading Symbol  CALIFORNIA WATER SERVICE GROUP [  CWT ] |   |  |                  |  |      |  |      |                                     |   | tionship of F<br>all applicab<br>Director<br>Officer (g  | le)  | Person(s)  | to Issuer<br>10% Ow<br>Other (s                                    |  |  |
|--|---------|------------------|--|--|--|---|--|------------------|--|------|--|------|-------------------------------------|---|--|--|--|--|--|--|
| (Last) (First) (Middle) CALIFORNIA WATER SERVICE COMPANY                                     |         |                  |  |  |  | 3. Date of Earliest Transaction (Month/Day/Year) 12/03/2021 |  |                  |  |      |  |      |                                     |   | below)   | P, Gene  | General Counsel  |  |  |  |
| 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      | CA 95112         |  |  |  |   |  |                  |  |      |  |      |                                     |   |  | Form filed by More than One Reporting Person   |  |  |  |  |
| (City)   | (State) | (Zi <sub>l</sub> | p)   |  |  |   |  |                  |  |      |  |      |                                     |   |  |  |  |  |  |  |
|  |         | Та               | ble I - Nor  | ո-Deri                                     | vativ  | e Se  | curitie  | s Acqı           | uired, I   | Disp | osed of,   | or I | Benefi                              | cially Ow   | ned  |  |  |  |  |  |
|  |         |                  |  | 2. Transaction<br>Date<br>(Month/Day/Year) |  | ear)  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)  |                  | 3.<br>Transaction<br>Code (Instr.<br>8)              |      | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a |      |                                     |   | 5. Amount of<br>Securities<br>Beneficially Owned<br>Following Reported<br>Transaction(s)                   |  | 6. Ownership<br>Form: Direct (D)<br>or Indirect (I)<br>(Instr. 4)        |  | 7. Nature of Indirect Beneficial Ownership |  |
|  |         |                  |  |  |  |   |  |                  |  | v    | Amount   |      | (A) or<br>(D)                       | Price   | (Instr. 3 an   |  |  |  | (Instr. 4)                                 |  |
| Common Stock 12/   |         |                  |  |  | 2/03/2021  |   |  |                  | F  |      | 61(1)  |      | D                                   | \$65.36   | 25,23  | 1.36   | Г  | )  |  |  |
| Common Stock 12/0  |         |                  |  |  | /05/2021   |   |  |                  | F  |      | 63 <sup>(2)</sup>  |      | D                                   | \$65.36   | 25,168.36  |  | Г  |  |  |  |
|  |         | •                | Table II - [   |  |  |   |  |                  |  |      | ed of, o   |      |                                     |   | ed   |  |  |  |  |  |
| Derivative Conversion Date Execution Security (Instr. 3) or Exercise (Month/Day/Year) if any |         | Date             | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year |  | Code (Instr.   |   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D) (Instr. 3, 4<br>and 5) |                  | 6. Date Exercis<br>Expiration Date<br>(Month/Day/Yea |      | e Securities Unde  |      | derlying<br>curity                  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction( | e Over Section of Sect | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |         |                  | ,  | Code V (A)                                 |  | (A)   | (D)  | Date<br>Exercisa | Expiratio<br>sable Date                              |      | Title  |      | Amount<br>or<br>Number<br>of Shares |   | (Instr. 4)   | 011(5)   |  |  |  |  |

- 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 (RSA) Award #526.
- 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 (RSA) Award #485.

## Remarks:

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

12/06/2021

\*\* 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.