FORM 4	4
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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).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Response	es)										
1. Name and Address of KROPELNICKI MA	2. Issuer Name CALIFORNIA [CWT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Othicer (give title below) Other (specify below)					
(Last) 1720 NORTH FIRS	3. Date of Earlies 06/02/2022	t Transactio	on (N	lonth/Day	/Year)	President & C)EO				
SAN JOSE, CA 95	4. If Amendment,	Date Origii	nal F	iled (Month	/Day/Yea	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)	(State)	(Zip)	Tab	le I - Non-D	Deriv	ative Sec	curitie	red, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		A. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership of Ind Form: Bene	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		06/02/2022		F		280 (1)	D	\$ 55.21	106,495	D	
Common Stock 06/03/2022			F		299 <u>(2)</u>	D	\$ 54.96	106,592 <u>(3)</u>	D		

Reminder: Report on a separate line for each class of securities beneficially owned dir indirectly.	rectly or	
	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 control number	SEC 1474 (9- 02)

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.		5.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Number and Expi		and Expiration	on Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of	of (Month/Day/Year)		Underlying Security		Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	Derivative		Securities (Instr. 5)		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Secu	Securities		(Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security					Acquired			4)			Following	Direct (D)		
						(A) or						Reported	or Indirect		
						Disposed						Transaction(s)	(I)		
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
						4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable	•	Title	Number				
								LACICISADIC	Date		of				
				Code	۷	(A)	(D)				Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
KROPELNICKI MARTIN A 1720 NORTH FIRST STREET SAN JOSE, CA 95112			President & CEO						

Signatures

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) 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 #595.
- (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 #522.
- (3) The securities owned includes share acquired through ESPP and dividend reinvestment.

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.