FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

| ı | Check this box if no longer subject to |
|---|--|
| l | 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 VERA GEO (Last) C/O CALIFOR | Issuer Name and Ticker or Trading Symbol CALIFORNIA WATER SERVICE GROUP [cwt] Date of Earliest Transaction (Month/Day/Year) 03/11/2015 | | | | | | | | | | tionship of R all applicab Director Officer (g below) | le) | 10% | | vner pecify | | | | |
|--|---|--|------|---|------|--|---------------------|--|-----------------|-----------------------------|---|--|---------------------|---|--|----------------|--|--|---|
| 1720 NORTH FIRST STREET | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv | Individual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person | | | | able Line) |
| (Street) SAN JOSE (City) | CA (State) | | 5112 | | | | | | | | | | | | Form file | d by More | than Oi | ne Reportin | g Person |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | 2A. Exe | Deemed ecution Dans | Deemed 3. cution Date, Tran | | 4. Securitie Of (D) (Instri | | s Acquired (A) or Disp r. 3, 4 and 5) | | or Disposed | 5. Amount Securities Beneficial Following Transaction | | Form: | nership Direct (D) irect (I) 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stoc | 1/2015 | | | | P | ľ | 4.128 | (D) A | 4 | \$24.2226 | 33,202 | | | 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) | vative Conversion Date Execution Date, If any | | | i. Fransaction Code (Instr. B) | | 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 Underl Derivative Securi (Instr. 3 and 4) | | nderlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transaction | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | ode V (A) (D) | | (D) | Date Expiration | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | | | |

Explanation of Responses:

Michelle Mortensen

03/12/2015

** 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.