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* McGhee Lynne P (Last) (First) (Middle) | | | | | 2. Issuer Name and Ticker or Trading Symbol CALIFORNIA WATER SERVICE GROUP [cwt] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | ationship of R all applicab Director Officer (g below) | e) | Person(s) to Issuer 10% Owner Other (specification) | | | |
|--|--|------------------|-------------|--------|---|------------|--|-----------|--|---------|---|--|---------------|---|--|--|---|--|--|--|
| CALIFORNIA WATER SERVICE COMPANY | | | | | | 03/04/2014 | | | | | | | | | Corp Secretary | | | | | |
| 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 | 95 | 112 | | | | | | | | | | | | Form file | d by More | than On | e Reportin | g Person | |
| (City) | (State) | (Zi _l | o) | | | | | | | | | | | | | | | | | |
| | | Та | ble I - Nor | ı-Deri | vativ | e Se | curitie | s Acqı | uired, [| Disp | osed of, | or I | Benefi | cially Ow | /ned | | | | | |
| Date | | | | | Transaction ate lonth/Day/Year) | | 2A. Deem Executior if any (Month/Da | Date, | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a | | | | Securities Beneficially Following | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | ership Direct (D) rect (I) I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | (Instr. 3 and | | | | (11341.4) | |
| Common Stock 03/0 | | | | | 4/201 | 4 | | A 2,622 A | | \$23.61 | 23,1 | 23,100 | | 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) | rivative Conversion Date Execution Date, | | | c | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | te | 7. Title and Amo Securities Unde Derivative Secu (Instr. 3 and 4) | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transaction | ly C | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Surface the of Bu | | | | c | Code | v | (A) | (D) | | | Expiration Date | Title | | Amount or Number of Shares | | (Instr. 4) | J.1(3) | | | |

Explanation of Responses:

Remarks

Restricted stock granted 3/4/2014 pursuant to the California Water Service Group equity incentive plan in a transaction exempt under Rule 16-b-3. RSA vests with vesting 1/3 one-year from grant date, with the remaining 2/3 vesting monthly over the succeeding 24 months.

Thomas F. Smegal 03/05/2014

** 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.