## FORM 4

(Print or Type Pecnonces)

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

OMB APPROVAL
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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).

#### 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

Name and Address of Reporting Person*  Luu Michael B				2. Issuer Name and Ticker or Trading Symbol CALIFORNIA WATER SERVICE GROUP [CWT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Other (specify below)  VP, Customer Service & IT					
(Last) (First) (Middle) 1720 NORTH FIRST STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/05/2019								VP, Ci	istomer Serv	ice & 11		
(Street) SAN JOSE, CA 95112				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yo			2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Reported Transaction(s)			Ownership or B	Beneficial		
						ode	V	Amour	(A) or (D)	Price	(Instr. 3 a	Instr. 3 and 4)		` /	Ownership (Instr. 4)	
Common Stock		03/05/2019				A		1,457 (1)	A	\$ 52.83	13,360	33		D		
Common Stock		03/06/2019				F		346 (2		\$ 52.05	13,014.	13,014.33		D		
Reminder:	Report on a s	separate line fo		Derivative S	ecuri	ties Ac	equire	Pers cont the f	ons what in the constant in th	no respo n this fo splays a of, or Be	orm are curre	e not requently valid	OMB con	ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2.	3. Transactio		e.g., puts, c:	alls, w	arran 5.	ts, op		, conver ate Exer			itle and	8. Price of	9. Number o	of 10.	11. Natu
Derivative Security	Conversion or Exercise Price of Derivative Security	Date	Year) Execution Da	te, if Transaction Code (Instr. 8)		Number		and Expiration Date (Month/Day/Year)		Am Und Sec	ount of derlying urities tr. 3 and		Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	of Indirect Beneficia Ownershi (Instr. 4)	
				Code	e V	(A)	(D)	Date Exe	e rcisable	Expiration Date	on Titl	Amount or Number of Shares				

#### **Reporting Owners**

		Relationships							
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
,	Luu Michael B								
	1720 NORTH FIRST STREET			VP, Customer Service & IT					
	SAN JOSE, CA 95112								

### **Signatures**

/s/ Michelle Mortensen on behalf of Michael B. Luu	03/07/2019
**Signature of Reporting Person	Date

#### **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) Restricted stock granted 3/5/2019 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 March 5, 2020, with the remaining 2/3 vesting quarterly over the succeeding 24 months.
- (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 #439.

#### Remarks:

Represents the number of shares acquired through the Employee Stock Participation Program for January 2019 and February 2019.

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.