## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 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 Ty	pe Response	s)													
1. Name and Address of Reporting Person* Rossi Michael J				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, Continuous Improvement					
(Last) (First) (Middle) C/O CALIFORNIA WATER SERVICE GROUP, 1720 NORTH FIRST STREET				3. Date of Earliest Transaction (Month/Day/Year) 04/04/2015							VP, Cor	itinuous Imj	provement		
(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 Person _ Form 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/Year)			(Instr. 8)		A. Securities Acquire (A) or Disposed of ( (Instr. 3, 4 and 5)		of (D)			Following	Ownership of Form:	Beneficial	
				(Month/Day/Year)		Code	V	Amoun	(A) or (D)	Price	(Instr. 3 a	tr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock		04/04/2015			F		26 (1)	D	\$ 24.84	29,135		D			
Common Stock 04/05/20			04/05/2015			F	30 (2) D \$ 24.84 29,105			D					
Common Stock 04/06/2015			04/06/2015			F		37 <u>(3)</u>	11)	\$ 25.11	29,068			D	
Reminder:	Report on a s	separate line f	or each class of secur	rities beneficiall	y own	ed direct	•								
							cont	tained i	n this fo	rm are	not requ	ction of inf uired to res OMB cont	spond unle	ess	2 1474 (9-02)
				Derivative Secu							ly Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	on 3A. Deemed Execution Da any	te, if Transacti Code Year) (Instr. 8)	5. Nu of De Se Ac (A Di of (Ir	umber	and Expiration Date (Month/Day/Year) Ur Se		7. Ti Amo Und Secu (Inst	itle and ount of erlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o  Derivat Securit Direct (  or India	f Beneficia Ownershi y: (Instr. 4)	
				Code	V (A	A) (D)	Date		Expiratio Date	Title	Amount or Number of Shares				

#### **Reporting Owners**

			Relationships					
Reporting Owner Name / Address		Director	10% Owner	Officer	Other			
C/O CA 1720 N	Michael J ALIFORNIA WATER SERVICE GROUP ORTH FIRST STREET OSE, CA 95112			VP, Continuous Improvement				

#### **Signatures**

Michelle Mortensen	04/07/2015		
**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) 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 Award (RSA) Award #283.
- (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 Award (RSA) Award #268.
- (3) 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 Award (RSA) Award #238.

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.