FORM 4

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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | |
|--|---|----------------|--|---|------------------|--------------------|--|---|--------------------------|--|---------------|---|---|------------------------------------|
| 1. Name and Address of Reporting Person * McGhee Lynne P | | | 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 T Officer (give title below) Other (specify below) | | | | | | |
| (Last) (First) (Middle) CALIFORNIA WATER SERVICE COMPANY, 1720 N. FIRST STREET | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/05/2013 | | | | | (| Corp. Secreta | ry | | | | |
| (Street) SAN JOSE, CA 95112 | | | 4. If Amendment, Date Original Filed(Month/Day/Year) 03/06/2013 | | | | 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) | T | able I - No | n-Der | ivative S | Securitie | es Acqu | ıired, Disp | osed of, or I | Beneficially (| Owned | |
| 1.Title of S (Instr. 3) | Security | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | (Instr. 8) | v | (A) or D | rities Acc Disposed 5, 4 and 5 (A) or t (D) | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) Ownership Form: Direct (D) or Indirect (I) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Commor | Stock | | 03/05/2013 | | A ⁽¹⁾ | | 3,001 | A | \$ 20.62 | 42,290 | | | D | |
| | | | | Derivative Securit | - | the f | tained ir form dis | n this fo splays a | orm ar | e not requently valid | | ormation spond unle rol numbe | ss | 1474 (9-02) |
| l. = | 1. | I | | (e.g., puts, calls, wa | arrants or | | | of, or Be | eneficia | lly Owned | | | | |
| | 2. | se (Month/Day/ | | | | | | tible sec | urities) | <u> </u> | l. n | | | Leave |
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | Date | Execution Da /Year) any | rate, if Transaction Code Year) (Instr. 8) | 5. | 6. D and (Mo | , convert ate Exerc Expirationth/Day/ | tible sectorisable on Date | 7. T Am Und Sec | • | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form of Derivati Security Direct (or Indire | Beneficia Ownersh (Instr. 4) |

Reporting Owners

| | Relationships | | | | |
|--|---------------|--------------|-----------------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| McGhee Lynne P CALIFORNIA WATER SERVICE COMPANY 1720 N. FIRST STREET SAN JOSE, CA 95112 | | | Corp. Secretary | | |

Signatures

| Thomas Smegal II |] | 04/04/2013 |
|---------------------------------|---|------------|
| **Signature of Reporting Person | n | 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) Form 4A filed to correct the Transaction Code. The transaction was an acquisition (A) exempt under Rule 16b-3. The original Form 4, filed on March 6, 2013, indicated that the transaction was a purchase (P), which would not be an exempt transaction.

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.