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| Form 4 | ETER C | | | | | | | | | | | |
|--|-----------------|--------------|---|---|------------|------------------|-------|--|--|--|------------|--|
| September 1 | 13, 2010 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES A | | | | | | ND FY | CUA | NCECO | MMISSION | OMB APPROVAL | | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | RITIES AND EXCHANGE COMMISSION ashington, D.C. 20549 | | | | | | OMB Number: | 3235-0287 | |
| | | | | IGES SEC | IN UR | BENEF: RITIES | ICIA | | | Expires: January 20 Estimated average burden hours per response | | |
| obligatio may con <i>See</i> Instr 1(b). | ons Section 17(| (a) of the l | Public U | tility I | Iol | ding Con | npany | • | Act of 1934, 935 or Section | l | | |
| (Print or Type | Responses) | | | | | | | | | | | |
| NELSON PETER C Symbol CALIF | | | | I FORNIA WATER SERVICE | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Lest) | GROUP [CWT] | | | | V Director | 100 | Our | | | | | |
| | | | | /Day/Year) | | | | | _X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President and CEO | | | |
| 11101 511 | (Street) | | 1 If Am | andmant | + Dr | ate Origina | 1 | 4 | Individual or Ioi | nt/Group Filir | or (Choole | |
| | (Succi) | | Filed(Mo | | | - | I | A | 5. Individual or Joi Applicable Line) X_Form filed by O | ne Reporting Pe | rson | |
| SAN JOSE | , CA 95112 | | | | | | | Ē | Form filed by Mo Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tab | le I - No | on-I | Derivative | Secur | ities Acqui | red, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | | | Securities Beneficially Owned Following Reported Transaction(s) | SecuritiesOwnershipBeneficiallyForm:OwnedDirect (D)Followingor IndirectReported(I)Transaction(s)(Instr. 4) | | | |
| ~ | | | | Code | v | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 09/09/2010 | | | М | | 10,000 | А | \$ 25.94 | 95,057 | D | | |
| Common Stock | 09/09/2010 | | | М | | 10,000 | D | \$ 35.343 | 85,057 | D | | |
| Common Stock | 09/10/2010 | | | М | | 5,000 | А | \$ 25.94 | 90,057 | D | | |
| Common Stock | 09/10/2010 | | | М | | 5,000 | D | \$ 35.842 | 85,057 | D | | |

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | TransactionDerivative Code Securities | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|--|-------|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Non Qualified Stock Option | \$ 25.94 | 09/09/2010 | | М | 1 | 0,000 | 09/09/2010 | 01/01/2011 | Common Stock | 10,000 |
| Non Qualified Stock Option | \$ 25.94 | 09/10/2010 | | М | 4 | 5,000 | 09/10/2010 | 01/01/2011 | Common Stock | 5,000 |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|---|------------|---------------|-------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| NELSON PETER C C/O CALIFORNIA 1720 NORTH FIRST SAN JOSE, CA 9511 | Х | | President and CEO | | | | | |
| Signatures | | | | | | | | |
| Calvin Breed | 09/13/2010 | | | | | | | |
| <u>**</u> 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).

Remarks:

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Sale of common stock from Long-Term Incentive Program. Sale due to options expiring in less than four months.

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.