#### Edgar Filing: WESTERN ALLIANCE BANCORPORATION - Form 4

#### WESTERN ALLIANCE BANCORPORATION

Form 4

January 29, 2015

## FORM 4

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

Check this box if no longer subject to

Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading CADY GERALD A Issuer Symbol WESTERN ALLIANCE (Check all applicable) BANCORPORATION [WAL] (Last) (First) (Middle) 3. Date of Earliest Transaction Director X\_ Officer (give title (Month/Day/Year) below) C/O WESTERN ALLIANCE 01/27/2015 EVP, California Administration BANCORPORATION, ONE E **WASHINGTON STREET** 

(Street) 4. If Amendment, Date Original

(Zin)

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

**OMB APPROVAL** 

10% Owner

Other (specify

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

PHOENIX, AZ 85004

(State)

(City)

(City)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transactio Code	4. Securities on Acquired (A) or Disposed of (D)			5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)  Code V	(Δ)		Owned Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	01/27/2015		A	6,000	A	\$0	93,849	D	
Common Stock	01/27/2015		A	1,000	A	\$0	9,967	I	By Spouse
Common Stock							6,191 <u>(1)</u>	I	401K Plan
Common Stock							3,723 <u>(1)</u>	I	Spouse 401k

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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.

SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amount of		Derivative	J
	Security	or Exercise		any	Code	of	(Month/Day/Year)		Underlying	Security (Instr. 5)	,	
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securities		]	
		Derivative				Securities		(In	(Instr.	Instr. 3 and 4)		(
Sec		Security				Acquired						J
						(A) or						]
						Disposed						7
						of (D)						(
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date	Expiration		or Number		
							Exercisable	Date	Title	of		
					Code V	(A) (D)						
					Code v	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CADY GERALD A C/O WESTERN ALLIANCE BANCORPORATION ONE E WASHINGTON STREET PHOENIX, AZ 85004

EVP, California Administration

### **Signatures**

/s/ Dale Gibbons (Attorney-in-fact) 01/29/2015

\*\*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) Reflects shares held in the 401K Plan to include employer match as of 1/22/15.

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.

Reporting Owners 2