Edgar Filing: WESTERN ALLIANCE BANCORPORATION - Form 4

WESTERN Form 4 November	NALLIANCE BA	NCORPO	RATIO	ON								
	·									OMB A	PPROVAL	
FOR	VI 4 UNITED	STATES				AND EX			OMMISSION	OMB Number:	3235-0287	
Check if no lo	this box			·						Expires:	January 31,	
subject Section Form 4		SE	CU	RITIES		ERSHIP OF	Estimated burden ho response	urs per				
Form 5 obligat may co <i>See</i> Ins 1(b).	ions Section 17	(a) of the H	Public	Utility	Ho	lding Co	mpar	U	Act of 1934, 1935 or Sectior)	1		
(Print or Type	e Responses)											
				Symbol I WESTERN ALLIANCE					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			BANCORPORATION [WAL]									
BANCOR	(First) TERN ALLIANC PORATION, ON GTON STREET,	E E.	3. Date (Month 11/06/	/Day/Y		Fransactior	1		_X_ Director _X_ Officer (give below) Chair		% Owner her (specify O	
				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 			
PHOENIX	X, AZ 85004								Form filed by M Person	ore than One F	Reporting	
(City)	(State)	(Zip)	Та	ble I - N	Non	-Derivativ	e Secu	rities Acqu	ired, Disposed of,	, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ansaction Date 2A. Deemed hth/Day/Year) Execution Da any (Month/Day/Y			Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)					5. Amount of Securities6.BeneficiallyForm:OwnedDirect (D)Followingor IndirectReported(I)Transaction(s)(Instr. 4)		
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	11/06/2015			G	V	10,000	D	\$ 0	1,239,052	D		
Common Stock	11/06/2015			S		69,977	D	\$ 38.3115 (1)	1,169,075	D		
Common Stock									30,000	Ι	Spouse	
Common									189,758	Ι	Sarver	

Stock			Family Trust dated 09/29/1997
Common Stock	166,022	Ι	SF III Ltd Partnership
Common Stock	33,105	Ι	Vulture II Corporation
Common Stock	5,149	I	Robert G. Sarver Trust dated 09/29/1997
Common Stock	6,193 <u>(2)</u>	Ι	401K Plan

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)	4. Transactio Code (Instr. 8)	of Derivative Securities Acquired		ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo
				(A) or Disposed						Repo Trans
				of (D)						(Instr
				(Instr. 3, 4, and 5)						
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Sarver Robert Gary C/O WESTERN ALLIANCE BANCORPORATION ONE E. WASHINGTON STREET, STE 1400 PHOENIX, AZ 85004	Х		Chairman and CEO				

Signatures

/s/ Dale Gibbons (Attorney-in-fact)

11/10/2015 Date

**Signature of Reporting Person

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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$38.19

- (1) to \$38.49, inclusive. The reporting person undertakes to provide to Western Alliance Bancorporation, any security holder of Western Alliance Bancorporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within this range.
- (2) Reflects shares held in the 401K Plan to include employer match as of 10/29/15.

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.