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| Guedry John Form 4 | | | | | | | | | | | |
|---|---|--------------------|--|--|--|-----------|---------------------------------------|---|--|-----------|--|
| January 30, 2 | 2018 | | | | | | | | | | |
| FORM | 14 | | | | | | | | OMB AF | PROVAL | |
| | UNITEL |) STATES | | AITIES A | | | NGE C | COMMISSION | OMB Number: | 3235-0287 | |
| Check thi if no long | | | | | | | Expires: | January 31, 2005 | | | |
| subject to Section 1 Form 4 or Form 5 | F CHANGES IN BENEFICIAL OWN SECURITIES | | | | | | Estimated a burden hou response | verage | | | |
| obligation may conti <i>See</i> Instru 1(b). | inue. Section 17 | 7(a) of the | Public Ut | | ling Con | npan | y Act of | e Act of 1934, 71935 or Section 90 | n | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | Symbol | Name and | | Tradi | ng | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | WESTERN ALLIANCE BANCORPORATION [WAL] | | | | | (Check all applicable) | | | |
| (Mont | | | (Month/D | te of Earliest Transaction th/Day/Year) | | | | Director 10% Owner X Officer (give title Other (specify below) below) | | | |
| ONE E. WA SUITE 1400 | SHINGTON S) | TREET, | 01/26/20 | 018 | | | | · · · · · · · · · · · · · · · · · · · | evada Adminis | tration | |
| | | | | nendment, Date Original Ionth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| PHOENIX, | AZ 85004 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | rities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | r) Executio any | med m Date, if Day/Year) | 3. Transactic Code (Instr. 8) | 4. Securi on(A) or Di (Instr. 3, | (A) | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 01/26/2018 | | | F | 739 | D | \$ 59.41 | 35,259 | D | | |
| Common Stock | 01/27/2018 | | | F | 729 | D | \$ 59.41 | 34,530 | D | | |
| Common Stock | | | | | | | | 760 <u>(1)</u> | I | 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 (9-02) required to respond unless the form

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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. Transactic Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Title : Amount Underly Securitie (Instr. 3 | t of ving les | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|---|---------------------|---|---|
| Derre | utin a O | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Number | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|---|------------|---------------|--------------------------------|-------|--|--|--|--|
| I generation of the | Director | 10% Owner | Officer | Other | | | | |
| Guedry John ONE E. WASHINGTON STREET, SUI PHOENIX, AZ 85004 | TE 1400 | | EVP, So. Nevada Administration | | | | | |
| Signatures | | | | | | | | |
| /s/ Dale Gibbons (Attorney-in-fact) | 01/30/2018 | | | | | | | |
| **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 1/18/18.

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.