Edgar Filing: Ardrey J. Kelly Jr. - Form 4

| Ardrey J. Kell Form 4 | y Jr. | | | | | | | | | | | |
|--|---|---|-------------------------------------|---|----------------|---|---------------|--|--|---|--|--|
| February 05, 2 | 2018 | | | | | | | | | | | |
| FORM | FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| | | IES AND EXCHANGE COMMISSION ngton, D.C. 20549 | | | | | 3235-0287 | | | | | |
| Check this if no longe subject to Section 16. Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b). | r STATE | 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 20(b) of the Investment Company Act of 1940 | | | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | |
| (Print or Type Re | esponses) | | | | | | | | | | | |
| 1. Name and Ad Ardrey J. Kel | 2. Issuer Name and Ticker or Trading Symbol WESTERN ALLIANCE BANCORPORATION [WAL] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| (Last) C/O WESTE BANCORPO WASHINGT 1400 | RATION, ON | NE E | 3. Date of (Month/Da 01/26/20 | - | nsaction | | | Director X Officer (giv below) SVP, Chie | | 6 Owner er (specify Officer | | |
| | | | | idment, Date Original h/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 | | | | |
| | 12 03004 | | | | | | | Person | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | ecuri | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | | | TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 01/26/2016 | | | Code V A | | (D) A | Price \$ 0 | 1,688 | D | | | |
| Common Stock | 01/24/2017 | | | А | 900 <u>(1)</u> | А | \$0 | 2,588 | D | | | |

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

Edgar Filing: Ardrey J. Kelly Jr. - Form 4

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) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|---|--|---|--|
| Repo | rting O |)wners | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |
| | Reporting | Owner Name / Addr | | Director | 10% Owner | | onships | | | Other | |

Ardrey J. Kelly Jr. C/O WESTERN ALLIANCE BANCORPORATION ONE E WASHINGTON STREET, STE 1400 PHOENIX, AZ 85004

SVP, Chief Accounting Officer

Signatures

/s/Randall S. Theisen (Attorney-in-fact) 02/05/2018

**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).

Date

(1) This filing reflects restricted stock grants, which were inadvertently excluded from the Reporting Person's previous Form 4 filings.

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.