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

#### WESTERN ALLIANCE BANCORPORATION

Form 4

January 31, 2017

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person \* Theisen Randall S

2. Issuer Name and Ticker or Trading Symbol

WESTERN ALLIANCE BANCORPORATION [WAL] (Check all applicable)

C/O WESTERN ALLIANCE

(First)

(Middle)

(Zip)

BANCORPORATION, ONE E. WASHINGTON STREET, STE 1400

(Street)

(State)

3. Date of Earliest Transaction

Director 10% Owner X\_ Officer (give title Other (specify below)

5. Relationship of Reporting Person(s) to

EVP, General Counsel

4. If Amendment, Date Original

Filed(Month/Day/Year)

(Month/Day/Year)

01/27/2017

6. Individual or Joint/Group Filing(Check

Applicable Line)

Issuer

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

PHOENIX, AZ 85004

(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 (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	01/27/2017		F	831	D	\$ 50.53	43,920	D	
Common Stock	01/28/2017		F	799	D	\$ 50.53	43,121	D	
Common Stock	01/31/2017		S	3,120	D	\$ 49.8	40,001	D	
Common Stock							6,116 <u>(1)</u>	I	401K Plan

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Common Stock	4,408	I	Randall & Barbara Theisen Trust
Common Stock	1,350	I	By Spouse

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration Da		7. Titl		8. Price of Derivative	9. Nu Deriv
Security	or Exercise	·	any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	` •		Secur	, ,	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable D	Date		of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

\*\*Signature of Reporting Person

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Theisen Randall S C/O WESTERN ALLIANCE BANCORPORATI ONE E. WASHINGTON STREET, STE 1400 PHOENIX, AZ 85004	ION		EVP, General Counsel					
Signatures								
/s/ Dale Gibbons (Attorney-in-fact) 01/31/20	017							

Date

2 Reporting Owners

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# **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 1/19/17.

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.