Edgar Filing: WESTERN ALLIANCE BANCORPORATION - Form 4

WESTERN Form 4 January 30,	ALLIANCE BAN	NCORPOI	RATIO	N								
	ЛЛ									APPROVAL		
FORM	4 UNITED	STATES		RITIES A shington.			NGE	COMMISSIO	N OMB Number:	3235-0287		
Check th if no lon				8	,				Expires:	January 31,		
subject t Section	6. SIAIEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERS SECURITIES								2005 ed average nours per e 0.5		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). 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												
(Print or Type	Responses)											
Sarver Robert Gary Symbol				er Name and Ticker or Trading ERN ALLIANCE				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			BANCORPORATION [WAL]					(Check an applicable)				
(Last)	(First) (I			of Earliest Transaction				_X_ Director 10% Owner _X_ Officer (give title Other (specify				
BANCORP	ERN ALLIANCI ORATION, ONE TON STREET	Ξ	01/28/2	Day/Year) 014				below)	below) airman and C			
				nendment, Date Original onth/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,	AZ 85004							Person	More than One	e Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Ao	cquired, Disposed	of, or Benefic	cially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	4. Securiti or(A) or Dis (D) (Instr. 3, 4	posed	of	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	01/00/0014			Code V	Amount	(D)	Price		Ð			
Stock	01/28/2014			А	40,000	А	\$0	1,949,469	D			
Common Stock								5,149	I	Robert G. Sarver Trust dated 09/29/1997		
Common Stock								5,632 <u>(1)</u>	I	401K Plan		
Common								199,758	I	Sarver		

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Stock			Family Trust dated 09/29/1997				
Common Stock	30,000	Ι	Spouse				
Common Stock	166,022	Ι	SF III Ltd Partnership				
Common Stock	33,105	Ι	Vulture II Corporation				
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)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name /	Relationships						
	Director	10% Owner	Officer	Other			
Sarver Robert Gary C/O WESTERN ALLIANCE BANC ONE E WASHINGTON STREET PHOENIX, AZ 85004	CORPORATION	Х		Chairman and CEO			
Signatures							
/s/ Dale Gibbons (Attorney-in-fact)	01/30/2014						
<u>**</u> 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 1/23/14.

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.