Edgar Filing: Bank of Marin Bancorp - Form 4

Bank of Marin	n Bancorp											
Form 4												
July 09, 2015												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							~~~~~~~~~	OMB AF	OMB APPROVAL			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287			
Check this	box		v v et s	inington,	D .C. 20					January 31,		
if no longer STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERSHIP OF					Expires:	2005		
subject to Section 16				SECUR					Estimated average burden hours per response 0.5			
Form 4 or												
Form 5	Filed pu	irsuant to S	Section 10	6(a) of the	e Securit	ies E	xchang	ge Act of 1934,				
obligations may contin		(a) of the	Public Ut	ility Hold	ing Con	ipany	Act o	f 1935 or Section	n			
See Instruc		30(h)	of the In-	vestment	Compan	y Act	t of 194	40				
1(b).												
(Print or Type Re	esponses)											
× 51	1											
1. Name and Address of Reporting Person <u></u> 2. Issuer Name and Ticker or Tra					Tradir	ıg	5. Relationship of Reporting Person(s) to Issuer					
			Symbol									-
			Bank of Marin Bancorp [BMRC]				C]	(Check all applicable)				
(Last)	(First)						k all applicable)					
(Month			(Month/D	onth/Day/Year)				X Director 10% Owner				
504 REDWOOD BOULEVARD, 07			07/08/20	07/08/2015				Officer (give title Other (specify below)				
SUITE 100								below)	DCIOW)			
			4. If Amer	f Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year)				Applicable Line)				
								X Form filed by C Form filed by M				
NOVATO, C	CA 94947							Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Aco	quired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ate 2A. Deer	med	3.	4. Securi	ties Ad	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	r) Executio	n Date, if	Date, if Transaction(A) or Disposed of Code (D)				Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/	Day/Vaar)					-	(D) or Indirect (I)	Beneficial		
		(Month/I	(Instr. 8) (Instr. 3, 4 and 5)				Following		Ownership (Instr. 4)			
						(\mathbf{A})		Reported	(()		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	07/08/2015			J <u>(1)</u>	260	A	\$ 52.8	55,724.4596	Ι	By Trust		

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Sklar Joel 504 REDWOOD BOULEVARD, SUITE 100 NOVATO, CA 94947	Х						
Signatures							
Krissy Meyer, 07/09/202 Attorney-in-Fact	15						

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) Shares received in payment of Director fee

**Signature of Reporting Person

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.