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AMERICA Form 4 February 06	N RIVER BANK	SHARES										
FORM	ЛЛ								OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287			
Check th if no lon						Expires:	January 31, 2005					
subject t Section	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES						ERSHIP OF	Estimated a burden hour	verage rs per			
Form 4 o Form 5		report to Sec	ction 1	6(a) of th	ne Secur	ities	Exchange	Act of 1934,	response	0.5		
obligatio may con <i>See</i> Instr 1(b).	ons Section 17(a) of the Pu	ıblic Ut	ility Hol	ding Co	mpar	•	1935 or Section				
(Print or Type	Responses)											
Owensby Jeffrey Symbol AMEI				[·] Name an CAN RI SHARES	VER		8	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (I	Middle) 3.	. Date of	Earliest T	ransactio	1	-	_X_ Director		Owner		
				ay/Year) 017			t	Officer (give titleOther (specify below) below)				
(Street) 4. If Amendment, Filed(Month/Day/Y				f Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				th/Day/Yea						One Reporting Person		
SACRAME	ENTO, CA 95814						-	Form filed by Mo Form filed by Mo Person				
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivativ	e Secu	rities Acqui	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		l Pate, if	3. Transactio Code (Instr. 8) Code V	4. Secur oror Dispo (Instr. 3.	ities A osed of 4 and (A) or	cquired (A) (D)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	02/03/2017	02/03/2017	7	Р	3,310	А	\$ 15.1366	3,310	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 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)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
Treporting C where i w	Director	10% Owner	Officer	Other				
Owensby Jeffrey 621 CAPITOL MALL, SACRAMENTO, CA 9	Х							
Signatures								
/s/ Jeffrey Owensby	02/03/2017							
<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).

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.