## Edgar Filing: Wagner Tom - Form 4

Wagner Tom	L												
Form 4	_												
May 15, 2018	8												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								COMMISSION	r	OMB APPROVAL			
	UNITE	DSIALE				ND EAC D.C. 205		NGE (		OMB Number:	3235-0287		
Check thi	s box		vv as	migu	, 1	D.C. 20.					January 31,		
if no longer STATEMENT OI			F CHAN	CHANGES IN BENEFICIAL OWNERS						Expires: 20			
subject to Stratewield of Char Section 16.				SECURITIES						Estimated a burden hou			
Form 4 or											response 0.5		
Form 5 obligatior	· · · · · · · · · · · · · · · · · · ·							-	e Act of 1934,				
may conti	inue. Section		Public Ut of the In	•		•	- ·		f 1935 or Sectio	n			
See Instru 1(b).	iction	30(II)	) of the m	vestillei		Joinpan	y Aci	. 01 194	+0				
1(0).													
(Print or Type R	Responses)												
1 Nama and A	ddaese of Domost								5 Deletienship of				
Wagner Ton	ddress of Reporti	ng Person _		r Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer				
PACI			•	PACIFIC MERCANTILE BANCORP [PMBC]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest	Tra	nsaction			Director	10%	Owner		
(Month/I			(Month/D	onth/Day/Year)					Officer (give title Other (specify below)				
			05/11/20	5/11/2018					EVP, Corporate Finance				
DRIVE, IH	IRD FLOOR												
				endment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Mor				onth/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
COSTA ME	SA, CA 9262	6								More than One Re			
(City)	(State)	(Zip)	Table	e I - Non	-De	rivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction I			3.				-	5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Ye	ear) Execution any	on Date, if	Transaction(A) or Disposed of Code (D)				d of	Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Instr. 5)			/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)				5)	Owned I	Indirect (I)	Ownership		
									Following Reported	(Instr. 4)	(Instr. 4)		
							(A)		Transaction(s)				
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	05/11/2018			S		1,000	D	\$	11,450	D			
Stock	00/11/2010			5		1,000	D	9.65	11,150	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)

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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)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	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**

<b>Reporting Owner Name / Address</b>	Relationships								
	Director	10% Owner	Officer	Other					
Wagner Tom 949 SOUTH COAST DRIVE THIRD FLOOR COSTA MESA, CA 92626			EVP, Corporate Finance						
Signatures									
/s/ Nancy Gray, attorney in fac Wagner	05/11/2018								
**Signature of Reporting		Date							
Explanation of Re	enon	606.							

## **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.