Edgar Filing: Stroeh J Dietrich - Form 4

Stroeh J Die	trich											
Form 4												
July 05, 201												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									-	OMB APPROVAL		
		JSIAIE		shington,			NGE C	UMINII55IUN	OMB Number:	3235-0287		
Check th	nis box		vva	sington,	D.C. 20	347				January 31,		
if no longer STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHIP				NERSHIP OF	Expires. 200			
Subject to STATEMENT OF CHARGES IN DELETICIAL OWNERS Section 16. SECURITIES							Estimated average burden hours per					
Form 4 c									response 0.5			
Form 5	Filed pu	ursuant to	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,				
obligatio may con		7(a) of the	Public U	tility Hold	ing Con	npang	y Act of	1935 or Section	ı			
See Instr		30(h)) of the In	vestment	Compan	y Ac	t of 194	0				
1(b).												
(Drint or Turce)	Deemences											
(Print or Type]	Kesponses)											
1. Name and A	Address of Reporting	g Person *	2 Issue	· Name and	Ticker or	Tradi	nα	5. Relationship of	Reporting Pers	son(s) to		
1. Name and Address of Reporting Person *2. IssuerStroeh J DietrichSymbol				r Name and Ticker or Trading				Issuer				
Symbol				f Marin Bancorp [BMRC]								
(Last)	(First)	(Middle)		Earliest Tra	^ -		-	(Checl	k all applicable	·)		
			/Day/Year)			_X_ Director10% Owner						
504 REDWOOD BOULEVARD, 07/01/2			-			Officer (give title Other (specify						
SUITE 100								below) below)				
(Street) 4. If Ame			ndment, Date Original			6. Individual or Joint/Group Filing(Check						
			nth/Day/Year)				Applicable Line)					
								X Form filed by C Form filed by M				
NOVATO,	CA 94947							Person		porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of	or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ta 24 Daa		3.			_	5. Amount of	6. Ownership	-		
Security	(Month/Day/Year		on Date, if	J. Transactio	4. Securit n(A) or Di			Securities	Form: Direct			
(Instr. 3) any (Month/Day/Year)			Code (Instr. 3, 4 and 5) (Instr. 8)				Beneficially	Indirect (I)	Beneficial			
							Owned Following		Ownership (Instr. 4)			
								Reported	(IIISU. 4)	(IIISU. +)		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	07/01/2011			J (1)	279	А	\$	14,599	Ι	By Bypass		
Stock	0//01/2011			J <u></u>	219	A	35.78	14,377	1	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)

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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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	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 / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
Stroeh J Dietrich 504 REDWOOD BOULEVARD, SUITE 100 NOVATO, CA 94947	Х						
Signatures							
Megan Garner, 07/05/20 Attorney-in-Fact)11						

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.