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CENTRAL VALLEY COMMUN Form 4 July 20, 2015	NITY BANCOR	RP				
•					OMB A	PPROVAL
FORM 4 UNITED STA		TIES AND E		COMMISSION	OMB Number:	3235-0287
Check this box if no longer					Expires:	January 31, 2005
subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMEN States Filed pursuar Section 17(a) of	nt to Section 16	SECURITIES (a) of the Secu lity Holding C	s rities Exchar ompany Act	WNERSHIP OF nge Act of 1934, of 1935 or Sectio 940	Estimated burden hou response	average urs per
(Print or Type Responses)						
1. Name and Address of Reporting Perso SOMMER THOMAS L	Symbol CENTRA	Name and Ticker AL VALLEY JNITY BANC	-	5. Relationship o Issuer (Che	f Reporting Per ck all applicabl	
(Last) (First) (Middle 7100 N. FINANCIAL DRIVE, SUITE 101	e) 3. Date of I (Month/Da 07/20/20	-	on	Director X_ Officer (giv below) EXECUTI		
(Street) FRESNO, CA 93720	4. If Amene Filed(Month	dment, Date Orig h/Day/Year)	inal	6. Individual or J Applicable Line) _X_ Form filed by Form filed by Person		erson
(City) (State) (Zip)	Table	I - Non-Derivati	ve Securities A	cquired, Disposed o	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Execution Execution any (Month/Day/Year)	Deemed 3 cution Date, if T Conth/Day/Year) (1	. 4. Secu TransactionAcquir Code Dispos	rities ed (A) or ed of (D) 3, 4 and 5) (A) or	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect
Reminder: Report on a separate line for e	each class of securi	ties beneficially	wned directly o	or indirectly.		
		Per infc req dis	sons who res rmation cont uired to respo	spond to the collect ained in this form ond unless the for ntly valid OMB con	are not m	SEC 1474 (9-02)
Table II -	- Derivative Secur (e.g., puts, calls,			Beneficially Owned securities)		
	n Date 3A. Deem Year) Execution		5. Number	r 6. Date Exercisa ive Expiration Date		7. Title and Amo Underlying Secu

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Security (Instr. 3)	5		any (Month/Day/Year)	Code (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		(
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
CVCY Stock Option 2000 Plan	\$ 13.5	07/20/2015		J <u>(1)</u>	V		5,000	07/20/2006	07/20/2015	CVCY Common Stock	5,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SOMMER THOMAS L 7100 N. FINANCIAL DRIVE, SUITE 101 FRESNO, CA 93720			EXECUTIVE VICE PRESIDENT				
Signatures							

Signatures

/s/ Thomas L. 07/20/2015 Sommer

**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) Expiration out-of-the-money of options granted under issuer compensation plan exempt from Section 16(b).

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.

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