Edgar Filing: PLUMAS BANCORP - Form 4

| PLUMAS BA | ANCORP | | | | | | | | | |
|---|--|--|---|---|---------------------------------------|--|--|--|---|--|
| Form 4 | | | | | | | | | | |
| May 23, 201 | 1 | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | APPROVAL | | |
| | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | N OMB Number: | 3235-0287 | | |
| Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont See Instru | 6. Filed pur Social Section 17(a | | | | | | | | January 31, 2005 d average burs per 0.5 | |
| l(b). | Pasmansas) | | | | | | | | | |
| (Print or Type F | (esponses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> McClintock Robert J | | | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | PLU | PLUMAS BANCORP [PLBC] | | | | (Check all applicable) | | | |
| (Last) (First) (Middle) P.O. BOX 6179, 305 W. LAKE | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/18/2011 | | | XDirector10% Owner Officer (give titleOther (specify below) below) | | | | |
| BLVD | | | | | | | below) | below) | | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| TAHOE CIT | ГҮ, СА 96145 | | | | | | Form filed by Person | More than One | Reporting | |
| (City) | (State) | (Zip) T | able I - Non-I | Derivative | Secur | ities A | cquired, Disposed | of, or Benefic | ially Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, any (Month/Day/Ye. | Code ar) (Instr. 8) | 4. Securi onAcquired Disposed (Instr. 3, Amount | (A) of of (D 4 and (A) or |) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 05/18/2011 | 05/23/2011 | P | 400 | A | \$ 2.4 | 22,310 <u>(1)</u> | I <u>(1)</u> | By Retirement Plan <u>(1)</u> | |

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. 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 Owna Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addro | ess | Relationships | | | | | | |
|--|------------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| McClintock Robert J P.O. BOX 6179 305 W. LAKE BLVD TAHOE CITY, CA 96145 | Х | | | | | | | |
| Signatures | | | | | | | | |
| Robert J | | | | | | | | |
| McClintock | 05/23/2011 | | | | | | | |

<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).
- (1) Shares held in SEP Plan

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.