

TRICO BANCSHARES /  
Form 4/A  
August 19, 2015

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
Koehnen Michael W

(Last) (First) (Middle)

63 CONSTITUTION DRIVE

(Street)

CHICO, CA 95973

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
TRICO BANCSHARES / [TCBK]

3. Date of Earliest Transaction  
(Month/Day/Year)  
08/10/2015

4. If Amendment, Date Original Filed(Month/Day/Year)  
08/12/2015

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director  10% Owner  
 Officer (give title below)  Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	08/10/2015		M	(A) 1,019 (1)	(1) 54,307.11 (2)	D	
Common Stock	08/19/2015		J(3)	0	A \$ 0 24,202	D (4)	
Common Stock	08/19/2015		J(3)	0	A \$ 0 8,600	I	CF Koehnen & Sons Profit Sharing which I am a Trustee.
Common Stock	08/19/2015		J(3)	0	A \$ 0 4,400	I	Mother which I am

Common Stock	08/19/2015	J <sup>(3)</sup>	0	A	\$ 0	1,700	I	a Trustee. By children
Common Stock	08/19/2015	J <sup>(3)</sup>	0	A	\$ 0	65,214	I <sup>(4)</sup>	CF Koehnen & Sons of which I am an owner.
Common Stock	08/19/2015	J <sup>(3)</sup>	0	A	\$ 0	2,300	I	By spouse

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

**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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price or Value of Underlying Securities (Instr. 3 and 4)	
						Date Exercisable	Expiration Date	Title	Amount or Number of Shares
						Code	V	(A)	(D)
Restricted Stock Units	<u>(1)</u>	08/10/2015		M	1,019	<u>(1)</u>	<u>(1)</u>	Common Stock	1,019

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Koehnen Michael W 63 CONSTITUTION DRIVE CHICO, CA 95973	X			

## Signatures

/S/ Michael Koehnen By Ryan Bryson  
Attorney-in-Fact

08/19/2015

\_\_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) Result of vesting of an RSU granted on August 11, 2014 that vested on August 10, 2015.
- (2) Amended to reflect the correct number of Shares Beneficially owned.
- (3) No transaction occurred among these shares. Intended only to reflect number of shares beneficially owned.
- (4) Shares Held with Broker.

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.