TRICO BANCSHARES /

Form 4

September 03, 2008

FORM 4

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

OMB 3235-0287 Number:

OMB APPROVAL

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

Section 16. Form 4 or Form 5 obligations

SECURITIES

Estimated average burden hours per response... 0.5

may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person **CASEY WILLIAM J	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)	TRICO BANCSHARES / [tcbk] 3. Date of Earliest Transaction	(Check all applicable)			
63 CONSTITUTION DRIVE	(Month/Day/Year) 08/29/2008	X Director 10% Owner Officer (give titleX Other (specification) below) Chairman of the Board			
(Street)	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			
CHICO, CA 95973		Form filed by More than One Reporting Person			

(City)	(State)	(Zip) Tabl	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)		5. Amount of Securities Form: Dire Beneficially (D) or Owned Indirect (I) Following (Instr. 4)		7. Nature of the Indirect Beneficial Ownership (Instr. 4)		
Common	09/03/2008		Code V <u>J(1)</u>	Amount 0	(A) or (D)	Price \$ 0	Reported Transaction(s) (Instr. 3 and 4) 864 (2)	D	
Stock	07/03/2008		3 <u>~~</u>	U	Λ	ΨΟ	00+ <u>~~</u>	Ъ	
Common Stock	08/29/2008		J <u>(3)</u>	3,684	D	\$ 16.44	1,179,973	I	By TriCo ESOP of which I am a Trustee
Common Stock	09/03/2008		J <u>(1)</u>	0	A	\$ 0	487,584	D	
Common Stock	09/03/2008		J <u>(1)</u>	0	A	\$ 0	124,000	I	Casey Family

LLC of which I am a manager

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.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. orNumber	6. Date Exerc Expiration D		7. Title ar		8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlyin	ng	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities	3	(Instr. 5)	Bene
	Derivative		•		Securities			(Instr. 3 a	nd 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								Δn	nount		
								or	iiouiit		
						Date			ımber		
						Exercisable Date		of			
				Code V	(A) (D)				ares		

Relationships

Reporting Owners

Reporting Owner Name / Address				•
	Director	10% Owner	Officer	Other
CASEY WILLIAM J				
63 CONSTITUTION DRIVE	X			Chairman of the Board
CHICO, CA 95973				

Signatures

Suzanne Youngs "Power of Attorney" 09/03/2008

**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) No transactions occurred among these shares, intended only to reflect number of shares beneficially owned.
- (2) Shares held with broker.

Reporting Owners 2

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(3) Former ESOP employees received their shares.

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.