### MCGRAW THOMAS C Form 3 July 16, 2018 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

### INITIAL STATEMENT OF 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)

Person <u>*</u> MCGRAW (Last)	(First) (Middle) NCORP, 975 EL		2. Date of Event Requiring Statement (Month/Day/Year) 07/06/2018		<ul> <li>3. Issuer Name and Ticker or Trad TRICO BANCSHARES / [T</li> <li>4. Relationship of Reporting Person(s) to Issuer (Check all applicable)</li> </ul>			TCBK] 5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) SOUTH SAN FRANCISCO, CA 94080			XDirector10% Ov OfficerOther (give title below) (specify below			•			
(City)	(State)	(Zip)	Та	ble I - N	on-Derivat	ive Securiti	es Be	neficially Owned	
1.Title of Security (Instr. 4)	y		2. <i>A</i> Ber	Amount of eneficially ( lstr. 4)	Securities	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ure of Indirect Beneficial rship	
Common Stoc	k		34	3,453		D	Â		
Reminder: Report owned directly or		te line for ea	ch class of securitie	es beneficia	ally S	EC 1473 (7-02	)		
	Person	•	oond to the colle lined in this form						

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#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative	Security:	
			Security	Direct (D)	

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January 31,

2005

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Number:

Expires:

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MCGRAW THOMAS C C/O FNB BANCORP 975 EL CAMINO REAL SOUTH SAN FRANCISCO, CA 94080	ÂX	Â	Â	Â		
Signatures						
/s/ Thomas McGraw By Jason Cove Attorney-In-Fact	07/16/2018					
**Signature of Reporting Person		Ι	Date			
Explanation of Responses:						

## Explanation of Responses:

\* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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.