#### Edgar Filing: COMMUNITY WEST BANCSHARES / - Form 4

#### COMMUNITY WEST BANCSHARES /

Form 4

October 06, 2014

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

3235-0287

**OMB APPROVAL** 

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Check this box

**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

obligations may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Stock, Ser A

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **BARTLEIN ROBERT** Issuer Symbol **COMMUNITY WEST** (Check all applicable) BANCSHARES / [CWBC] (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_\_ Director 10% Owner Other (specify Officer (give title (Month/Day/Year) below) 445 PINE AVE. 10/06/2014 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting GOLETA, CA 93117 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 7. Nature of 3. 6. Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Ownership Indirect (Instr. 3) Code Disposed of (D) Beneficially Form: Direct Beneficial (Month/Day/Year) (Instr. 3, 4 and 5) Owned (D) or Ownership (Instr. 8) Following Indirect (I) (Instr. 4) Reported (Instr. 4) (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price **CWBC** Fixed Rate Cumulative 10/06/2014 46 D J Perpetual Preferred

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

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

| 1. Title of | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exerc    |            | 7. Titl | e and      | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|------------------|------------|---------|------------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti  | onNumber   | Expiration D     | ate        | Amou    | int of     | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/      | Year)      | Under   | lying      | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e                |            | Securi  | ities      | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |                  |            | (Instr. | 3 and 4)   |             | Own    |
|             | Security    |                     |                    |            | Acquired   |                  |            |         |            |             | Follo  |
|             |             |                     |                    |            | (A) or     |                  |            |         |            |             | Repo   |
|             |             |                     |                    |            | Disposed   |                  |            |         |            |             | Trans  |
|             |             |                     |                    |            | of (D)     |                  |            |         |            |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |                  |            |         |            |             |        |
|             |             |                     |                    |            | 4, and 5)  |                  |            |         |            |             |        |
|             |             |                     |                    |            |            |                  |            |         | Amount     |             |        |
|             |             |                     |                    |            |            |                  |            |         | Amount     |             |        |
|             |             |                     |                    |            |            | Date             | Expiration | T:41-   | or<br>Name |             |        |
|             |             |                     |                    |            |            | Exercisable Date | Date       |         | Number     |             |        |
|             |             |                     |                    | G 1 W      | (A) (B)    |                  |            | of      |            |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |                  |            |         | Shares     |             |        |

## **Reporting Owners**

| Reporting Owner Name / Address                       | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
|  | Director      | 10% Owner | Officer | Other |  |  |  |
| BARTLEIN ROBERT<br>445 PINE AVE.<br>GOLETA, CA 93117 | X             |           |         |       |  |  |  |

## **Signatures**

/s/ Charles G. Baltuskonis for Robert 10/06/2014 Bartlein

> \*\*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).

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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