| Olague Michael Form 4 March 06, 2019 | | | | | |
|--|--|---|--|--|--|
| FORM 4 UNITED STAT | | OMB APPROVAL | | | |
| UNITED STAT | ES SECURITIES AND EXCHANGE (Washington, D.C. 20549 | Number: 3235-0287 | | | |
| Check this box if no longer | | Expires: January 31, 2005 | | | |
| subject to STATEMENT Section 16. | Estimated average burden hours per | | | | |
| Form 4 or Form 5 Filed pursuant t | Section 16(a) of the Securities Exchang | response 0.5 | | | |
| $\frac{\text{obligations}}{\text{Section 17(a) of th}}$ | e Public Utility Holding Company Act o | | | | |
| See Instruction 30(| n) of the Investment Company Act of 194 | | | | |
| 1(b). | | | | | |
| (Print or Type Responses) | | | | | |
| | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Olague Michael | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | SIERRA BANCORP [BSRR] | (Check all applicable) | | | |
| (Last) (First) (Middle) | 3. Date of Earliest Transaction | (encer un applicable) | | | |
| | (Month/Day/Year) | Director 10% Owner | | | |
| 86 N MAIN STREET | 03/06/2019 | XOfficer (give titleOther (specify below) below) | | | |
| | | EVP/Chief Banking Officer | | | |
| (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 | | | |
| PORTERVILLE, CA 93257 | | Form filed by More than One Reporting Person | | | |
| (City) (State) (Zip) | Table I - Non-Derivative Securities Acc | uired, Disposed of, or Beneficially Owned | | | |
| 1.Title of Security2. Transaction Date (Month/Day/Year)2A. Detection Execution(Instr. 3)any | emed 3. 4. Securities Acquired (A on Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) | .) 5. Amount of 6. 7. Nature of Securities Ownership Indirect Beneficially Form: Beneficial | | | |
| (Month | Day/Year) (Instr. 8) | OwnedDirect (D)OwnershipFollowingor Indirect(Instr. 4) | | | |
| | (A) | Reported (I) Transaction(s) (Instr. 4) | | | |
| | or Code V Amount (D) Price | (Instr. 3 and 4) | | | |
| Common 03/06/2019 Stock | P 15,000 A \$26.885 | 16 3/1 D | | | |

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 / Address | Relationships | | | |
|---|---------------|-----------|---------------------------------|-------|
| | Director | 10% Owner | Officer | Other |
| Olague Michael 86 N MAIN STREET PORTERVILLE, CA 93257 | | | EVP/Chief Banking Officer | |
| Signatures | | | | |

/s/ Michael Olague 03/06/2019

<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).

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.