#### TRICO BANCSHARES /

Form 4 May 05, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB 3235-0287

Number:

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

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

(Print or Type Responses)

1(b).

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

TRICO BANCSHARES / [tcbk]

(Check all applicable)

(First) (Middle) (Last)

(Street)

05/04/2005

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

05/03/2005

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

**63 CONSTITUTION DRIVE** 

4. If Amendment, Date Original

Filed(Month/Day/Year)

Chairman of the Board 6. Individual or Joint/Group Filing(Check

Applicable Line)

1.224.640 <sup>(4)</sup> I

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

CHICO, CA 95973

Common

Stock

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities Ownership Indirect (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially Form: Direct Beneficial Ownership (Month/Day/Year) Owned (D) or (Instr. 8) Following Indirect (I) (Instr. 4) Reported (Instr. 4) (A) Transaction(s) or (Instr. 3 and 4) Code Amount (D) Price Common  $J_{\underline{1}}$ 05/05/2005 0 A \$0 864 (2) D Stock By TriCo ESOP of Common 05/03/2005 J 4,000  $1,239,765 \frac{(3)}{}$  I which I Stock am a Trustee By TriCo

15.125 D

ESOP of

which I

am a Trustee

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Common Stock	05/05/2005	J <u>(1)</u>	0	A	\$ 0	122,000	I	Family LLC of which I am a manager
Common Stock	05/05/2005	<u>J(1)</u>	0	A	\$ 0	500,084	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.

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 Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative	6. Date Exerc Expiration D (Month/Day/	ate		ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security			Securities Acquired (A) or			(mstr.	. 3 and 4)		Owne Follo Repo
				Disposed						Trans
				of (D) (Instr. 3,						(Instr
				4, and 5)						
					Date Exercisable	Expiration Date	Title	Amount or Number of		
			Code V	(A) (D)				Shares		

## **Reporting Owners**

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

# **Signatures**

Suzanne Youngs "Power of	05/05/2005			
Attorney"	03/03/2003			
**Signature of Reporting Person	Date			

Reporting Owners 2

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## **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 by broker.
- (3) Please Note: ESOP purchased stock.
- (4) Please Note: 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.