#### SARVER ROBERT GARY

Form 4

Common

Common

Common

Stock

Stock

November 23	, 2009											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-0287			
if no longe subject to	Check this box if no longer subject to Section 16.  STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: Estimate burden h	ted average hours per			
may contin	Form 5 obligations 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											
(Print or Type Re	esponses)											
1. Name and Ad SARVER RO	S	2. Issuer Name and Ticker or Trading Symbol WESTERN ALLIANCE BANCORPORATION [WAL]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)					
(Last)  C/O WESTE BANCORPO SAHARA A	E (N	3. Date of Earliest Transaction (Month/Day/Year) 11/20/2009					X Director 10% Owner X Officer (give title Other (specify below) Chairman, President and CEO					
I AC VECAS		4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
LAS VEGAS	5, INV 89102							Person		, ,		
(City)	(State)	(Zip)	Table I -	Non-l	Derivative	Secur	ities Ac	quired, Disposed	of, or Benefi	cially Owned		
	2. Transaction Date Month/Day/Year)		ate, if Tran Cod 'Year) (Ins	e tr. 8)	4. Securit on(A) or Di (Instr. 3,	sposed	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	11/20/2009		P	V	10,000	A	\$ 4.18	185,429	I	By Sarver Family Trust Dated 09/27/1997		

2,375,816

30,000

166,022

D

I

I

By Spouse

By SF III

(1)

### Edgar Filing: SARVER ROBERT GARY - Form 4

Stock			Limited Partnership
Common Stock	31,374	I	By Vulture II Corporation
Common Stock	4,000	I	By The Harrison H. Hilton Trust

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)

> 9. Nu Deriv Secur Bene

> Follo Repo Trans (Insti

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 Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber 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)
			Code '	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

# **Reporting Owners**

\*\*Signature of Reporting Person

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SARVER ROBERT GARY C/O WESTERN ALLIANCE BANCORPORATION 2700 WEST SAHARA AVENUE LAS VEGAS, NV 89102			Chairman, President and CEO				
Signatures							
/s/ Dale Gibbons (Attorney-in-Fact) 11/23/2009							

Reporting Owners 2

Date

### Edgar Filing: SARVER ROBERT GARY - Form 4

## **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) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or any other purpose.

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.