Form 4







FRB OMB Number: 7100-0091 FDIC OMB Number: 3064-0030

OCC OMB Number: 1557-0106





Each depositor insured to at least \$250,000 per insured bank

Beneficial Ownership Filings: Filing

Statement of Changes in Beneficial Ownership of Securities
Filed pursuant to Section 16(a) of the Securities Exchange Act 1934

Filing Information											
No longer subject to Sec	ction 16. Form 4	4 or Form 5 c	bligations ma	y continue.							
Issuer Name	Ticker or Trading Symbol				Date of Earliest Transaction Required to be Reported			If Amendment, Date of Original Filing			
First Republic Bank	FRC				03/23/2015						
Filer Information											
Name of Reporting Person	Street Address			City			State	ZIP Code		Relationship of Reporting Person to Issuer	
Michael D. Selfridge	c/o First Republic Bank 111 Pine Street, 2nd Floor			San Francsico			CA	94111		Officer  Description: Chief Operating Officer	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
Title of Security	Transaction Date	Deemed Execution Date	Transaction Code	<u>v</u>	Amount of Securities Acquired or Disposed of		Price of Securities Acquired or Disposed of	Amount of Securities Beneficially Owned Following Reported Transactions		Ownership Form	Nature of Indirec Beneficial Ownership
Common Stock(1)(2)(3)	03/23/2015		F	6,523 \$		ares (D)	\$57.54	33,965 Shares		Direct	
Table II - Derivative Se	curities Acqui	red, Dispos	ed of, or Bene	eficially Ov	wned						
There are no Derivative	Securities										
<b>Explanation of Respor</b>	nses										
(1) A restricted stock aw (2) A restricted stock aw case dependent on the (3) 6,523 shares were w	ard of 25,000 s achievement of	hares was m certain perfo	nade on March ormance goals	n 1, 2013 ar s.	nd 6,250 sh	nares bed	come vested on eac	h March 1, 2			
* Signed by:			(/s/Michael D.	Selfridge)	Date: 03/	/24/2015					
The agencies are collecting th Forms 3, 4, and 5 ranges from Division, FDIC, 550 17 St. NW NW, Mailstop 41, Washington Street, SW, Mailstop 8-4, Was sponsor, and a respondent is * Intentional misstatements or	n 0.5 to 1.0 hour for I, Washington, DC: , DC 20551 (for Stashington, DC 20219 not required to resp	each form. Co 20429 (for State Ite member ban I (for National bat bond to, an infor	mments on the ac nonmember ban ks); or Jessie Dur anks); or Marilyn I mation collection	ccuracy of this iks); Cindy Ayo naway, Cleara Burton, Senior unless it displa	burden estim ouch, Division ince Officer, Lo Paralegal (Re ays a currently	nate and sun of Resear egislative a egulations) y valid Office	ggestions for reducing th ch and Statistics, Board of and Regulatory Activities of, Chief Counsel, Regulat ce of Management and B	is burden may b of Governors of Division, Office ions & Legislatio	e addressed the Federal of the Comp on . The age	d to PRA Clears Reserve Syste otroller of the Co ncies may not o	ance Officer, Lega m, 20th & C St., urrency, 250 E

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