Edgar Filing: Layne Larry D - Form 4

Lavne Larry D

| Form 4 March 07, 20 | | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------|---------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------|--|
| | FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | OMB APPROVAL | | | |
| | UNITED | STATES S | | ITIES A hington, | | | NGE C | OMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue Filed pursuant to Section 1 Section 17(a) of the Public U | | | | NGES IN BENEFICIAL OWN SECURITIES (6(a) of the Securities Exchange (tility Holding Company Act of nvestment Company Act of 194 | | | | e Act of 1934, 1935 or Sectior | Expires: Estimated a burden hour response | 0 | |
| 1(b). | | | | | | | | | | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person * Layne Larry D2. Issue Symbol | | | | r Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| Pacific I | | | | Ethanol, Inc. [PEIX] | | | | (Check all applicable) | | | |
| (Last) (First) (Middle) 3. Date of (Month/D) 400 CAPITOL MALL #2060 03/06/24 | | | Month/Da | • · | | | X_ Director Officer (give title below)Dother (specify below) | | | | |
| | | | | endment, Date Original nth/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| SACRAME | NTO, CA 95814 | | | | | | | Form filed by M Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Table | I - Non-D | erivative S | Securi | ities Acqu | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution D any (Month/Day | Date, if y/Year) | 3. Transactio Code (Instr. 8) Code V | 4. Securiti r(A) or Dis (Instr. 3, 4 Amount | sposed | l 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 | 03/06/2018 | | | Р | 10,000 | A | \$ 3.695 | 56,758 | 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) | 4. Transactic Code (Instr. 8) | of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) | | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------|--|--------------------|---------------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | Code V | (Instr. 3, 4, and 5) (A) (D) | | Expiration Date | Title Amoun or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Add | ress | Relationships | | | | | | |
|--------------------------------------------------------------|------------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Layne Larry D 400 CAPITOL MALL #20 SACRAMENTO, CA 9581 | | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Larry D. Layne | 03/07/2018 | | | | | | | |
| <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.