WINTERBOTTOM BRAD L

Form 5

February 02, 2018 **OMB APPROVAL** FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer WINTERBOTTOM BRAD L Symbol WEST BANCORPORATION INC (Check all applicable) [WTBA] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner _ Officer (give title Other (specify X (Month/Day/Year) below) below) 12/31/2017 EXECUTIVE VICE PRESIDENT 1820 PARK AVENUE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) DES MOINES, ÂIA Â50315 _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person (City) (State)

(City)	(State) (Z	Table	I - Non-Deriv	ative Secu	ırities	Acquire	d, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's	or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)	(I) (Instr. 4)	
COMMON STOCK	05/24/2017	Â	L	37 (1)	A	\$ 22.16	6,537	I	Held by spouse
COMMON STOCK	08/23/2017	Â	L	38 (1)	A	\$ 21.25	6,575	I	Held by spouse
COMMON STOCK	11/22/2017	Â	L	32 (1)	A	\$ 25.36	6,607	I	Held by spouse
COMMON STOCK	Â	Â	Â	Â	Â	Â	74,736	D	Â

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COMMON \hat{A} \hat{A}

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.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative	
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securities	ities	(Instr. 5)		
		Derivative				Securities			(Instr.	3 and 4)		
		Security				Acquired						
						(A) or						
						Disposed						
						of (D)						
						(Instr. 3,						
						4, and 5)						
										Amount		
										Amount		
							Date	Expiration	Title	or Number		
							Exercisable	Date		of		
						(A) (D)						
						(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer

WINTERBOTTOM BRAD L 1820 PARK AVENUE DES MOINES, IAÂ 50315

Â Â EXECUTIVE VICE PRESIDENT Â

Other

Signatures

Marie I. Roberts, By Power of Attorney 02/02/2018

**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).
- (1) Shares acquired pursuant to reinvestment of dividends received into purchases of new shares.
- (2) 950 shares were acquired pursuant to purchases in the employee savings plan 401(k) during the period from January 1, 2017 through December 31, 2017.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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