SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** 

SECURITIES

## OMB APPROVAL

3235-OMB Number: 0104

0.5

Estimated average burden

## hours per response:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person <sup>*</sup><br>HOPKINS LYNN M   | 2. Date of Event<br>Requiring Statement<br>(Month/Day/Year)<br>12/07/2023 |                    | 3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>RBB Bancorp</u> [ RBB ]  |  |                       |               |  |   |
|--|---|--------------------|--|--|-----------------------|---------------|--|---|
| (Last) (First) (Middle)<br>1055 WILSHIRE BLVD., SUITE<br>1220<br>(Street)<br>LOS<br>ANGELES<br>(CA 90017<br>(City) (State) (Zip) | -   |                    | 4. Relationship of Reporting<br>Issuer<br>(Check all applicable)<br>Director<br>X Officer (give<br>title below)<br>Interim EVP | 10% C<br>Other<br>below)               | )<br>wner<br>(specify | File<br>6. Ir | d (Month/Day/<br>ndividual or Jo<br>eck Applicable<br>Form filed<br>Person | int/Group Filing<br>Line)<br>by One Reporting<br>by More than One |
| Table I - Non-Derivative Securities Beneficially Owned   |   |                    |  |  |                       |               |  |   |
| 1. Title of Security (Instr. 4)  |   |                    | 2. Amount of Securities<br>Beneficially Owned (Instr.<br>4)  | Form: [<br>(D) or li                   |                       |               | 4. Nature of Indirect Beneficial<br>Ownership (Instr. 5)                   |   |
| Common Stock, No Par Value   |   |                    | 0  | I                                      | D                     |               |  |   |
| Table II - Derivative Securities Beneficially Owned     (e.g., puts, calls, warrants, options, convertible securities)           |   |                    |  |  |                       |               |  |   |
| 1. Title of Derivative Security (Instr. 4)<br>Expiration Date<br>(Month/Day/Year)  |   | ate                | 3. Title and Amount of Se<br>Underlying Derivative Se<br>(Instr. 4)  |  |                       | cise          | ise Form:  | 6. Nature of<br>Indirect Beneficial<br>Ownership (Instr.          |
| Explanation of Responses:  | Date<br>Exercisable   | Expiration<br>Date |  | Amount<br>or<br>Number<br>of<br>Shares |                       | ive or Ind    | Direct (D)<br>or Indirect<br>(I) (Instr. 5)                                | 5)  |

**Remarks:** 

No Securities are beneficially owned.

## /s/ Lynn Hopkins

\*\* Signature of Reporting Person

12/22/2023

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 5 (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.

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 Number.