FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

A/	$ \sim $	20540
Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	. 0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>LIN CHUANG I</u>					2. Issuer Name and Ticker or Trading Symbol RBB Bancorp [RBB]										(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) $\frac{X}{X} \text{Director} \qquad \qquad 10\% \text{ Owner}$					
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 05/16/2024											Officer (give title below)			specify	
	055 WILSHIRE BLVD SUITE 1200					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)						X Form filed by One Reporting Person Form filed by More than One Reporting Person												I			
LOS AN	LOS ANGELES CA 90017				Rule 10b5-1(c) Transaction Indication																
(City)	(S	tate)	(Zip)			Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In															
		Tab	le I - Non-	-Deriv	ative	e Se	curiti	es A	cqui	ired, l	Disp	osed	of, or	Ber	neficial	ly Owned	i				
1. Title of Security (Instr. 3)				2. Trans Date (Month/	/Day/Year) if		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.						Benefic Owned	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amoun	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Common Stock, No Par Value 05					5/2024				M		900	900 A		\$0	27	27,876		D		
		1	Table II - D									sed of				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	ate,	4. Transaction Code (Instr.		5. Number of				cisat Date	ole and	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		Amount s	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable		piration te	Title		Amount or Number of Shares						
Option (right to buy)	\$13.2098									(1)	05/	/21/2024	Comn		10,250		10,250	0	D		
Option (right to buy)	\$17.08									(2)	05/	/20/2025	Comn		10,000		10,000	0	D		
Option (right to buy)	\$18.25									(3)	05/	/17/2026	Comn		10,000		10,000	0	D		
Restricted Stock Units	\$0	05/16/2024			M			900		(5)		(4)	Restric Stoc	k	1,600	\$0	700		D		

Explanation of Responses:

- $1. \ These \ options \ vest \ in three \ equal \ annual \ installments \ beginning \ one \ year \ after \ the \ 05/21/2014 \ date \ of \ grant.$
- 2. These options vest in three equal annual installments beginning one year after the 05/20/2015 date of grant.
- 3. These options vest in three equal annual installments beginning one year after the 05/17/2016 date of grant.
- 4. There will be no expiration date once restricted stock units vest
- 5. These restricted stock units vest in two installments: 900 immediately vested on the date of grant and 700 vest in one year from the date of grant.

/s/ Chuang-I Lin

05/16/2024

** Signature of Reporting Person

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 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.

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.