MacLennan Mark Form 4 July 28, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * MacLennan Mark

(Street)

(State)

Symbol SVB FINANCIAL GROUP [SIVB] 5. Relationship of Reporting Person(s) to

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

Issuer

(Last)

(City)

(Instr. 3)

(First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year)

07/27/2010

Director 10% Owner

(Check all applicable)

President SVB Capital

X_ Officer (give title Other (specify below) below)

3003 TASMAN DRIVE

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

SANTA CLARA, CA 95054

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

(Zip)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of 3. Transaction Date 3A. Deemed 4. 5. Number 6. Date Exercisable and Derivative Conversion (Month/Day/Year) Execution Date, if Transaction Derivative **Expiration Date** Securities Security or Exercise Code (Month/Day/Year) any

(Instr. 3 and 4)

7. Title and Amour

Underlying Securit

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	nstr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code \	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
Non-Qualified Stock Option (right to buy)	\$ 45.19	07/27/2010		A	7,955		07/27/2010	07/27/2017	Common Stock	7,9
Performance Shares	\$ 0	07/27/2010		A(1)	3,889		12/31/2012	01/01/2013	Common Stock	3,8

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MacLennan Mark 3003 TASMAN DRIVE SANTA CLARA, CA 95054

President SVB Capital

Signatures

By: Lisa Bertolet as attorney in fact For: Mark A
MacLennan

07/28/2010

**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).

The reporting person was granted restricted stock units (RSUs) which are subject to performance-based vesting. The grants are earned (1) based on the Compensation Committee's assessment of the Company's performance, at its sole discretion. In addition, to the extent

(1) based on the Compensation Committee's assessment of the Company's performance, at its sole discretion. In addition, to the extent earned, the grants are subject to time-based vesting, to cliff vest on 12/31/2012.

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.

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