FORM 4	
Check this box if no	

longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION	I
Washington, D.C. 20549	Ì

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

N	OMB APPF	ROVAL
	OMB	3235
	Number:	0287
'	Expires: Nove	ember 30 201 <sup>-</sup>
	Estimated ave	rage
	burden hours	per
	response	0.5

(9-02)

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

(Print or Type Respon	nses)													
1. Name and Addres STONE TERRY			e						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
400 CAPITOL M	First) (Middle ALL, SUITE 206	50	3. Date of Earliest Transaction (Month/Day/Year) 06/24/2013					Officer (give titleOther (specify below) below)						
(SACRAMENTO,			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					
(City) (	(State) (Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect any	Deemed ution Date, if nth/Day/Year)	Code Disposed of (D)			<b>)</b> )	5. Amount of Securities Beneficially Owned Following Reported		<ol> <li>Nature of Indirect Beneficial Ownership</li> </ol>				
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)			
Common Stock	06/24/2013			А		13,333	A	\$0	25,592 <mark>(1)</mark>	D				

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

SEC 1474 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)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	on	Num	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secu	rities			(Inst	r. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o							Reported	or Indirect	
						Dispo	osed						Transaction(s)	(I)	
						of (D							(Instr. 4)	(Instr. 4)	
						(Instr									
						4, and	15)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
STONE TERRY L 400 CAPITOL MALL, SUITE 2060 SACRAMENTO, CA 95814	Х							

### **Signatures**

/s/ Terry L. Stone	06/24/2013
*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) The share amounts reflect the Issuer's 1-for-15 reverse stock split which was effective May 14, 2013.

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.