FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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>CIM Service Provider, LLC</u>						2. Issuer Name and Ticker or Trading Symbol <u>CIM Commercial Trust Corp</u> [CMCT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title X Other (specify below) Member of 10% Owner Group				
(Last) (First) (Middle) 6922 HOLLYWOOD BLVD 9TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 07/21/2014												
					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - 1	lon-Deriv	ative/	Seci	uritie	s Ac	quire	ed, D	sposed o	f, or E	enefici	ially	Owne	ed		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					2A. Deemed Execution Date, if any (Month/Day/Year)		·			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			d 5) Sec Ber Ow		ount of ities ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v			Amount	(A) or (D)	Price			action(s) 3 and 4)		(11150.4)				
Common Stock 07/21/201					014	4			P ⁽¹⁾		2,500	A	\$21.81	21.8132 ⁽²⁾		33,184	D	
Common Stock 07/22/201				014	4			P ⁽¹⁾		2,500	A	\$21.70	\$21.7087(3)		35,684	D		
Common Stock 07/23/201				014	14			P ⁽¹⁾		2,500	A	\$21.76	\$21.7663(4)		38,184	D		
		Та	ıble II								osed of, convertib				vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	eemed tion Date, h/Day/Year)	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	Expir (Mon	te Exer ation E th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Number of		t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- $1.\ The purchases reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on January 29, 2014.$
- 2. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$21.79 to \$21.87, inclusive. The reporting person undertakes to provide to CIM Commercial Trust Corporation, any security holder of CIM Commercial Trust Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnotes (2), (3) and (4).
- 3. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$21.7 to \$21.73, inclusive.
- 4. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$21.75 to \$21.8, inclusive.

/s/ Eric Rubenfeld, attorney in

07/23/2014

fact

** Signature of Reporting Person

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 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.