FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL				
OMB Number:	3235-0287				
Estimated average burd	en				
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>Golay Frank H Jr</u>							2. Issuer Name and Ticker or Trading Symbol CIM Commercial Trust Corp [CMCT]									5. Relationship of Reporting Person(s) to Is: (Check all applicable) X Director 10% Or			
(Last) (First) (Middle) 4700 WILSHIRE BLVD						3. Date of Earliest Transaction (Month/Day/Year) 05/03/2018									Offic belo	er (give title w)		Other (below)	specify
(Street) LOS ANGELES CA 90010 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Forr Forr	′				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da						Execution Date,			Code (Instr. 5)						nd Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
						Code	v	Amount		A) or D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)			
Common Stock 05/03/							/2018		A		3,378 A		A	\$0) 1	13,965			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date Ex Expiration (Month/Da	•	Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

/s/ David Thompson, attorney

05/07/2018

Date

in fact

** 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.