### Edgar Filing: KENT S BELASCO - Form 4

KENT S BELA Form 4	ASCO									
February 26, 2	.013									
FORM	4				~~~	NGEO		OMB AF	PROVAL	
	UNITEDSTR		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this if no longer	T OF CHAN	GES IN I	BENEF	ICIA	LOW	NERSHIP OF	Expires:	January 31, 2005		
subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	Filed pursuar ue. Section 17(a) or	nt to Section 1	SECUR 6(a) of the tility Hold	Estimated average burden hours per response 0.5 n						
(Print or Type Rea	sponses)									
1. Name and Add KENT S BEL	Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol FIRST MIDWEST BANCORP INC					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
		[FMBI]					(Cheer	x an applicable	)	
(Last)	(First) (Middl E PLACE, SUITE 1	(Month/D	-	ansaction			Director X Officer (give below) EVP,Chie		Owner er (specify icer	
ITA COALILIA		. If Amendment, Date Original iled(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
ITASCA, IL 6							Person		1 0	
(City)	(State) (Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
Security ( (Instr. 3)	an	ecution Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3, Amount	ispose	d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock (	02/23/2013		F	1,574 (1)	D	\$ 12.73	40,907	D		
Common Stock							28,255	I	By NQ Stock Option Gain Deferral Plan	
Common Stock							6,020	I	By Profit Sharing Plan Trust	

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

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. Conversion	3. Transaction Date		4. Transaati	5.	6. Date Exerc		7. Title		8. Price of	9. Nu Doriu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amoun Underl Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
KENT S BELASCO ONE PIERCE PLACE SUITE 1500 ITASCA, IL 60143			EVP,Chief Info/Ops Officer						
Signatures									
Andrea L. Stangl, Attorney-in-fact for Kent S.									
Belasco			02/26/2013						
<u>**Signature of Reporting</u>	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).

On February 23, 2011 the Issuer granted the Reporting Person a restricted stock award of 9,659 restricted shares of First Midwest Bancorp, Inc. Common Stock under the First Midwest Bancorp, Inc. Omnibus Stock Incentive Plan which were scheduled to vest in two

(1) equal annual installments on the second and third anniversary of the date of grant. On February 23, 2013, 4,785 shares of the originally granted restricted stock award vested, of which 1,574 shares were surrendered by the Reporting Person in order to satisfy tax withholding obligations. This form is being filed to reflect the surrender of such shares to satisfy the Reporting Person's tax withholding obligation.

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.