Edgar Filing: FIRST MIDWEST BANCORP INC - Form 4

FIRST MIDWEST BANCORP INC

Form 4

Stock

February 18, 2016

| redition 10, | 2010 | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------|--------------|-------|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------|--|--|
| FORM | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | OMB APPROVAL | | | |
| Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check thi if no long | er | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF | | | | | | | January 31, 2005 | | |
| subject to Section 10 Form 4 or | 6. | NI OF CHAN | SECUR | | ICIA | L OW | NEKSHIP OF | Estimated a burden hour response | verage | | |
| Form 5 obligations may continue. See Instruction 1(b). 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 R | desponses) | | | | | | | | | | |
| 1. Name and A Prame Thom | son * 2. Issue Symbol | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| | | FIRST [FMBI] | MIDWES | T BANC | COR | P INC | (Check all applicable) | | | | |
| (Last) ONE PIERO | (First) (Midd | (Month/I | f Earliest Tr Day/Year) 016 | ansaction | | | Director 10% Owner Other (specify below) below) EVP, Strat Plng/Consumer Bkng | | | | |
| | 4. If Amo | 4. If Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | | | |
| *** ********************************* | | nth/Day/Year | _ | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| ITASCA, IL | , 60143 | | | | | | Person | | porung | | |
| (City) | (State) (Zip | Tab | le I - Non-D | erivative : | Secur | ities Acq | uired, Disposed of | or Beneficial | ly Owned | | |
| 1.Title of Security (Month/Day/Year) Execution Day (Instr. 3) 2. Transaction Date 2A. Deemed Execution Day (Month/Day/Year) Execution Day (Month/Day/Year) | | | Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| | | | Code V | Amount | | Price | (Instr. 3 and 4) | | | | |
| Common Stock (1) | 02/17/2016 | | A | 7,998 (2) | A | \$ 16.82 (2) | 33,017 | D | | | |
| Common Stock | | | | | | | 9,025 | I | By IRA | | |
| Common | | | | | | | 0.0 | • | By Profit | | |

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 (9-02)

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80

Sharing

Plan Trust

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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 Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | cisable and | 7. Titl | e and | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|-------------------|------------|---------------------|-----------------|----------|----------------------------------------|-------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | TransactionNumber | | Expiration Date | | Amou | nt of | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | lying | Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securi | ties | (Instr. 5) | Bene |
| | Derivative | | | | Securities | | | (Instr. | 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amaunt | | |
| | | | | | | | | | | | |
| | | | | | | Date Exercisable | Expiration Date | Title Nu | | | |
| | | | | | | | | | | | |
| | | | | Code V | (A) (D) | | | | | | |
| | | | | Code V | 4, and 5) | | • | Title | Amount or Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Prame Thomas M ONE PIERCE PLACE SUITE 1500 ITASCA, IL 60143

EVP, Strat Plng/Consumer Bkng

Signatures

Andrea L. Stangl, Attorney-in-fact for Thomas M. Prame

02/18/2016

Date

**Signature of Reporting Person

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) Long Term Incentive Compensation restricted stock award granted pursuant to the Amended and Restated First Midwest Bancorp, Inc. Omnibus Stock and Incentive Plan.
- The number of shares represented by this award was determined by dividing the dollar value of the award granted to the Reporting Person (2) by \$16.82 (the average high and low sale price of one share of the Issuer's Common Stock on the date of grant). This award will vest in two equal installments, specifically on the second and third anniversaries of the date of grant.

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.

Reporting Owners 2