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FIRST MID Form 4 June 14, 201	WEST BANCOF	RP INC							
FORM	14								PPROVAL
	UNITED	STATES		RITIES A shington	N OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 c	ger STATEN 16.	/IENT OI	F CHAN	NGES IN SECUI		TCIAL O	WNERSHIP OF	Expires: Estimated burden hou response	urs per
Form 5 obligatio may com <i>See</i> Instr 1(b).	ns tinue. Section 17(a) of the l		inge Act of 1934, t of 1935 or Secti 1940	·				
(Print or Type]	Responses)								
1. Name and A Hoskins Mi	2. Issuer Name and Ticker or Trading Symbol FIRST MIDWEST BANCORP INC [FMBI]			5. Relationship of Reporting Person(s) to IssuerC (Check all applicable)					
(Last)	3. Date of Earliest Transaction (Month/Day/Year)			Director 10% Owner X Officer (give title Other (specify below) below)					
ONE PIERCE PLACE, SUITE 1500			06/13/2016			EVP, Chief HR Officer			
	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person					
ITASCA, II	2 60143						Form filed by Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Pamindar: Par	ort on a senarata line	for each a	oss of see	Code V		(D) Price			
Kenninder: Ker	oort on a separate line	TOT EACH CI	ass of sec	unues dene	Perso inforr requi	ons who re nation con red to resp ays a curre	or indirectly. spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)

 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 Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date	Underlying Securities	Derivat
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Securit

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	s 1 1				(Instr. 5
				Code	V	(A) (D)) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Under NQ Retirement Plan	<u>(1)</u>	06/13/2016		A		26 (2)	<u>(1)</u>	<u>(1)</u>	Common Stock	26	\$ 18.

Reporting Owners

Reporting Owner Name / Address	Relationships							
F8	Director	10% Owner	Officer	Other				
Hoskins Michelle Y ONE PIERCE PLACE SUITE 1500 ITASCA, IL 60143			EVP, Chief HR Officer					
Signatures								
/s/ Andrea L. Stangl, Attorney- Hoskins	in-fact fo	r Michelle Y	7. 06/14/2016					

**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) Shares of phantom stock acquired under the Nonqualified Retirement Plan have a 1-for-1 conversion ratio and are payable in cash upon distribution to the Participant in accordance with the terms of the Plan.

Date

Between June 1, 2016 and June 14, 2016, the Reporting Person acquired 26 shares of First Midwest Bancorp, Inc. Common Stock under(2) the First Midwest Bancorp, Inc. Non-Qualified Retirement Plan through the bi-weekly employee contribution feature of the Plan. The information in this report is based on a Plan statement dated June 13, 2016.

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.