Edgar Filing: Ryan James C III - Form 4

Ryan James C I Form 4 November 19, 2 FORM Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instructi 1(b).	2018 4 UNITED ST ox STATEME Filed pursu Section 17(a) on	CNT OF ant to S of the F	Washi F CHANG Section 16(a	ington, D ES IN BI SECURIT a) of the S ity Holdin	.C. 2054 ENEFIC TIES Securities	9 IAL OWN s Exchange any Act of	COMMISSION NERSHIP OF e Act of 1934, f 1935 or Section 0	OMB Number: Expires: Estimated a burden hou response	•	
(Print or Type Res	ponses)									
1. Name and Address of Reporting Person <u>*</u> Ryan James C III		rson <u>*</u>	2. Issuer Name and Ticker or Trading Symbol OLD NATIONAL BANCORP /IN/ [ONB]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) ONE MAIN S'	(First) (Mic	ldle)	3. Date of Earliest Transaction (Month/Day/Year) 11/16/2018				Director 10% Owner X_ Officer (give title Other (specify below) SEVP-CFO			
(Street) EVANSVILLE, IN 47708			4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State) (Z	ip)	Table I	- Non-Der	ivative Se	curities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execut any		3. Transactio Code (Instr. 8) Code V	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)		
COMMON STOCK						(_)	1,371	I <u>(1)</u>	ONB KSOP	
COMMON STOCK							2,000	D (3)		
COMMON STOCK							2,430	D (2)		
COMMON STOCK							3,095	D (4)		
COMMON STOCK							102,892	D <u>(5)</u>		

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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 SEC 1474 information contained in this form are not (9-02)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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and An Underlying Sec (Instr. 3 and 4)	urities	8. H Dei Sec (Ins
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
PHANTOM STOCK	\$ 18.42 (<u>6)</u>	11/16/2018	Р	52	(7)	(7)	COMMON STOCK	52 <u>(6)</u>	\$

Reporting Owners

Reporting Owner Name / Address		Relatio	onships				
	Director	10% Owner	Officer	Other			
Ryan James C III ONE MAIN ST EVANSVILLE, IN 47708			SEVP-CFO				
Signatures							
JEFFREY L KNIGHT, EXECUTIVE VP AND CHIEF LEGAL COUNSEL, AS ATTORNEY-IN-FACT 11/19/2018							

**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) KSOP balance updated based upon current data.
- (2) Shares held in an IRA with a broker.
- (3) Shares held with a broker.
- (4) Old National Bancorp Employee Stock Purchase Plan.
- (5)

Date

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Includes 48,750 restricted stock units, 11,251 restricted stock shares and 42,891 shares of common stock. Fractional amounts have been rounded to the nearest whole number.

- (6) Each share of phantom stock represents the right to receive one share of ONB common stock or the cash value thereof.
- (7) Shares of phantom stock are payable in cash following termination of the reporting person's employment with ONB or reporting person becoming disabled. The reporting person may transfer his phantom stock account into an alternative investment account at any time.

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.