Edgar Filing: Clemens Paul F - Form 4

Clemens Paul Form 4 July 16, 2010										
FORM	Л							PPROVAL		
	UNITEDS	OMB Number:	3235-0287							
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed pursu s. Section 17(a)	burden hou response	Estimated average burden hours per response 0.5							
(Print or Type Re	esponses)									
1. Name and Ad Clemens Pau	ldress of Reporting Po 1 F	Symbol	FIRST MIDWEST BANCORP INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Mi E PLACE, SUITH	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 07/16/2010				Director 10% Owner Officer (give title Other (specify below) below) below) EVP, Chief Financial Officer			
	(Street)		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 			
ITASCA, IL	60143					Form filed by Person	More than One R	eporting		
(City)	(State) (Z	Zip) Table	e I - Non-De	erivative S	ecurities A	Acquired, Disposed o	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	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)		
Common Stock	07/16/2010		А	144 <u>(1)</u>	A (2)	31,581	D			
Common Stock						2,000	Ι	By IRA		
Common Stock						291	I	By Profit Sharing Plan Trust		

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 (9-02)

Edgar Filing: Clemens Paul F - Form 4

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. Transactio Code (Instr. 8)	5. 6. Date Exercisable and hNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		7. Title Amoun Underly Securiti (Instr. 3	t of ving les	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title M	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Clemens Paul F ONE PIERCE PLACE, SUITE 1500 ITASCA, IL 60143			EVP, Chief Financial Officer			
Signatures						
Andrea L. Stangl, Attorney-in-fact for Clemens	Paul F.		07/16/2010			
**Signature of Reporting Person			Date			
Evalenction of Deene	n	-				

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).
- Represents a portion of base salary paid to the Reporting Person in bi-weekly installments of fully vested shares. The Reporting Person(1) may not transfer the shares during the period the Company has any obligations outstanding under the U.S. Treasury's Troubled Asset Relief Program except in the case of the Reporting Person's death or disability.

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 \$12.81 (the average high and low sale price of one share of the company's common stock as quoted on the Nasdaq Stock Market on July 15, 2010).

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.