#### Edgar Filing: White Linda Elaine - Form 4

White Linda El Form 4 April 06, 2010	laine									
FORM	<b>4</b> UNITE	П СТАТЕС	SECUDI	PIES ANI	DEVCI	IANCEC	OMMISSION		PROVAL	
Check this b	UNITE	DSIAIES		ington, D			OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). StateMent of CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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						Expires: January 31, 2005 Estimated average burden hours per response 0.5				
(Print or Type Res	sponses)									
1. Name and Address of Reporting Person <u>*</u> White Linda Elaine			2. Issuer Name <b>and</b> 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) T	irst) (Middle) 3. Date of Ea (Month/Day/ 04/02/2010			saction		X Director Officer (give below)		Owner r (specify	
(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			
EVANSVILL	E, IN 47708						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table I	- Non-Der	ivative Se	curities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/*	any	eemed tion Date, if h/Day/Year)	3. Transactio 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)		
COMMON STOCK							4,516.718	D		

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)

### **Reporting Owners**

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of Derivative6. Date Exercisable and Expiration DateSecurities(Month/Day/Year)Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun Numbe Shares
PHANTOM STOCK	\$ 12.17 (1)	04/02/2010		Р	361.545	(2)	(2)	COMMON STOCK	361.5

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
White Linda Elaine						
ONE MAIN ST	Х					
EVANSVILLE, IN 47708						

## **Signatures**

JEFFREY L KNIGHT, EXECUTIVE VICE PRESIDENT AND GENERAL COUNSEL, AS 04/06/2010 ATTORNEY-IN-FACT

\*\*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) Each share of phantom stock represents the right to receive one share of ONB common stock or the cash value thereof.
- (2) 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 her phantom stock account into an alternative investment account at any time.
- (3) Shares include most recent quarterly dividend reinvestment shares.

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.

Date