OLD NATIONAL BANCORP /IN/

Form 4

February 01, 2016

COMMON

STOCK

1 Columny 01, 2	2010					
FORM	4 UNITED STATE	OMB APPROVAL E COMMISSION OMB Number 3235-0287				
Check this if no longe subject to Section 16. Form 4 or Form 5	box T STATEMENT	Washington, D.C. 20549				
obligations may contin <i>See</i> Instruct 1(b).	Section 17(a) of	the Public Utility Holding Company Act of (h) of the Investment Company Act of	et of 1935 or Section			
(Print or Type Re	esponses)					
1. Name and Ad JONES ROB	dress of Reporting Person ERT G	2. Issuer Name and Ticker or Trading Symbol OLD NATIONAL BANCORP /IN	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
		[ONB]	(Check all applicable)			
(Last) ONE MAIN S	(First) (Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/28/2016	X Director 10% OwnerX Officer (give title Other (specify below) PRESIDENT AND CEO			
EVANOVII I	(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 Form filed by More than One Reporting			
EVANSVILL			Person			
(City)	(State) (Zip)		Acquired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	any	ecution Date, if Transaction(A) or Disposed o				
COMMON STOCK	01/28/2016	A 68 500 A	Price			
COMMON STOCK			68,505 D (2)			
COMMON STOCK			3,266 I (3) ONB KSOP			
COMMON STOCK			14,180 D (4)			
~~						

6,920 (5)

D

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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 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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 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. Transaction Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
EMPLOYEE STOCK OPTION	\$ 21.65					02/01/2007	02/24/2016	COMMON STOCK	45,900
EMPLOYEE STOCK OPTION	\$ 18.43					01/25/2008	01/25/2017	COMMON STOCK	59,100
EMPLOYEE STOCK OPTION	\$ 15.29					02/01/2009	01/24/2018	COMMON STOCK	70,000
EMPLOYEE STOCK OPTION	\$ 13.31					02/01/2010	01/29/2019	COMMON STOCK	49,000
PHANTOM STOCK	\$ 13.8 (7)					<u>(6)</u>	<u>(6)</u>	COMMON STOCK	497 <u>(7</u>

Reporting Owners

Reporting Owner Name / Address	Relationships					
• 0	Director	10% Owner	Officer	Other		
JONES ROBERT G ONE MAIN ST EVANSVILLE, IN 47708	X		PRESIDENT AND CEO			

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Signatures

JEFFREY L KNIGHT, EXECUTIVE VP AND CHIEF LEGAL COUNSEL, AS ATTORNEY-IN-FACT

02/01/2016

**Signature of Reporting Person

Date

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) Includes 274,239 restricted stock units and 91,432 shares of common stock. Fractional amounts have been rounded to the nearest whole number.
- (2) Shares held with a broker.
- (3) KSOP balance updated based upon current data.
- (4) Shares held in Oltrust FBO Robert and Lisa Jones.
- (5) Old National Bancorp Employee Stock Purchase Plan.
- (6) 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.
- (7) Each share of phantom stock represents the right to receive one share of ONB common stock or the cash value thereof.

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.

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