**BRAUN ALAN W** Form 4 January 16, 2019

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 

**OMB APPROVAL** 

Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

January 31, 2005

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

2. Issuer Name and Ticker or Trading

OLD NATIONAL BANCORP /IN/

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

Symbol

1(b).

(Print or Type Responses)

BRAUN ALAN W

1. Name and Address of Reporting Person \*

				OLD NATIONAL BANCORP /IN/ [ONB]			/IN/	(Check all applicable)				
	(Last) ONE MAIN	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2018			nsaction		- - 1	_X Director Officer (give ti pelow)	itle 10% Owner Other (specify below)	
Filed(Mon			(Month/Day/Year)				1	. Individual or Joint/Group Filing(Check pplicable Line)  X_ Form filed by One Reporting Person Form filed by More than One Reporting				
	EVANSVILI	LE, IN 47708							Ī	Person		porung
	(City)	(State)	(Zip)	Table	e I - No	n-De	erivative S	Securi	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned
	1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execution	emed on Date, if 'Day/Year)	Code (Instr.	8) V	4. Securi for Dispos (Instr. 3, Amount 3,065	sed of 4 and (A) or		Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)  D (2)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	COMMON STOCK									2,835	I	The Braun Investment Partnership, L.P. (3)
	COMMON STOCK									316	D (1)	
	COMMON STOCK									31,431	D (4)	
										20,000	D (4)	

#### COMMON STOCK

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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BRAUN ALAN W								
ONE MAIN ST	X							
EVANSVILLE, IN 47708								

### **Signatures**

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

01/16/2019

\*\*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) REGISTERED AS ALAN W AND SHARON A BRAUN
- (2) HELD WITH ONB WEALTH MANAGEMENT IN THE NAME OF ALAN & SHARON BRAUN.

THE REPORTING PERSON IS A GENERAL PARTNER OF THE LIMITED PARTNERSHIP WHICH OWNS THE REPORTED

(3) SECURITIES. THE REPORTING PERSON DISCLAIMS BENEFICIAL OWNERSHIP OF THE REPORTED SECURITIES EXCEPT TO THE EXTENT OF HIS PECUNIARY INTEREST THEREIN.

Reporting Owners 2

### Edgar Filing: BRAUN ALAN W - Form 4

#### (4) HELD WITH ONB WEALTH MANAGEMENT IN THE NAME OF ALAN W BRAUN.

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.