### Edgar Filing: Evernham Scott J - Form 4

Evernham Sco	tt J									
Form 4										
July 16, 2018	-								PROVAL	
FORM	4 UNITEI	) STATE		FIES ANI ington, D			OMMISSION	OMB OMB Number:	3235-0287	
Check this b if no longer subject to Section 16.	F CHANG	0 /	NERSHIP OF	Expires: January 3 Expires: 200 Estimated average burden hours per						
Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	ue. Section 17	7(a) of the	•	ity Holdin	g Compa	any Act of	e Act of 1934, 1935 or Section 0	response	0.5	
(Print or Type Res	sponses)									
1. Name and Address of Reporting Person <u>*</u> Evernham Scott J			Symbol	ame and Ti		-	5. Relationship of Reporting Person(s) to Issuer			
			OLD NA' [ONB]	HONAL I	BANCU	KP /IIN/	(Check all applicable)			
(Last) ONE MAIN S	3. Date of Earliest Transaction (Month/Day/Year) 06/15/2018				Director 10% Owner X_ Officer (give title Other (specify below) below) EXEC VP - WEALTH MANAGEMENT					
(Street) EVANSVILLE, IN 47708			4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
EVANSVILL	L, IN 47700						Person			
(City)	(State)	(Zip)	Table l	- Non-Deri	vative Sec	curities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	a		Deemed ution Date, if th/Day/Year)	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	<ul><li>(A)</li><li>or</li><li>(D) Price</li></ul>	Reported Transaction(s) (Instr. 3 and 4)			
COMMON STOCK							36,386	D (2)		
COMMON STOCK							422 <u>(1)</u>	I	ONB KSOP	
COMMON STOCK							400	D <u>(5)</u>		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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#### 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (Instr.		5. nNum of Deriv Secu (A) o Dispo of (D (Instr 4, and	vative rities nired or osed )) r. 3,		ate	7. Title and Am Underlying Sec (Instr. 3 and 4)	urities	8. l De See (In
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
PHANTOM STOCK	\$ 18.7 <u>(4)</u>	06/15/2018		Р		22		(3)	(3)	COMMON STOCK	22 (4)	\$
PHANTOM STOCK	\$ 18.7 <u>(4)</u>	06/15/2018		J	v	12		(3)	(3)	COMMON STOCK	12 (4)	\$

## **Reporting Owners**

Reporting Owner Name / Address	ss Relationships							
	Director	10% Owner	Officer	Other				
Evernham Scott J ONE MAIN ST EVANSVILLE, IN 47708			EXEC VP - WEALTH MANAGEMENT					
Signatures								

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

\*\*Signature of Reporting Person

06/18/2018

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) KSOP balance updated based upon current data.
- (2) Includes 16,875 restricted stock units, 3,750 restricted stock shares and 15,762 shares of common stock. Fractional amounts have been rounded to the nearest whole number.
- (3) 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.
- (4) Each share of phantom stock represents the right to receive one share of ONB common stock or the cash value thereof.
- (5) Old National Bancorp Employee Stock Purchase Plan

### **Reporting Owners**

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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.