Carapella Victor P Form 4 January 29, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

(Cl- - -1- -11 - - -1: - -1-1-)

Issuer

January 31, 2005

0.5

burden hours per

response...

Estimated average

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

2. Issuer Name and Ticker or Trading

FIRST MIDWEST BANCORP INC

30(h) of the Investment Company Act of 1940

Symbol

1(b).

(Print or Type Responses)

Carapella Victor P

1. Name and Address of Reporting Person *

		[FMBI]				71 1271111		i iive	(Check all applicable)				
(Last) (First) (Middle) ONE PIERCE PLACE, SUITE 1500			3. Date of Earliest Transaction (Month/Day/Year) 01/29/2010					Director 10% Owner X Officer (give title Other (specify below)					
(Street) ITASCA, X1 60143				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 Person				
	(City)	(State)	(Zip)	Tab	le I - Non-D	erivative	Secui	rities Acqu	cquired, Disposed of, or Beneficially Owned				
	1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Execution any		3. Transactio Code (Instr. 8)	(Instr. 3,	spose	d 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)		
	Stock	01/29/2010			A	121 (1)	A	13.565 (2)	34,122	D			
	Common Stock								48,881	I	By NQ Stock Option Gain Deferral Plan		
	Common Stock								25,580	I	By Profit Sharing Plan Trust		

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

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SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Title	and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ctionNumber	Expiration Da	ate	Amour	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	8) Derivative			Securities	(Instr. 5)	
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date Exercisable	Expiration Date	Title	or	
									Number	
									of	
				Code	V (A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Carapella Victor P ONE PIERCE PLACE SUITE 1500 ITASCA, X1 60143

EVP, Comm'l Banking Group Mgr.

Signatures

Andrea L. Stangl, Attorney-in-fact for Victor P. Carapella

01/29/2010

**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).
- Represents a salary adjustment paid to the Reporting Person in bi-weekly installments of fully vested shares. The Reporting Person may (1) 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.
- (2) Represents the average of the high and low price of FMBI common stock as quoted on the Nasdaq Stock Market on 1/28/2010.

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.

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