Edgar Filing: Gottschalk Keith - Form 4

Gottschalk Keit Form 4	th									
February 19, 20)19									
FORM 4	4			DEVO	T A B TA				PROVAL	
	ATES SECUR Was	hington, D			GE CU	MMISSION	OMB Number:	3235-0287		
if no longer subject to Section 16. Form 4 or Form 5 obligations may continu	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						Act of 1934,	Expires:January 31, 2005Estimated average burden hours per response0.5		
(Print or Type Res	ponses)									
1. Name and Add Gottschalk Kei	Symbol	Symbol Issuer OLD SECOND BANCORP INC					ionship of Reporting Person(s) to (Check all applicable)			
(Last) 37 S. RIVER S	(First) (Midd	(Month/Da	$(\mathbf{v} (\mathbf{v} (\mathbf{v} (\mathbf{v} (\mathbf{v} \mathbf{v}))) \mathbf{v} (\mathbf{v} (\mathbf{v} \mathbf{v})) \mathbf{v} (\mathbf{v} (\mathbf{v} (\mathbf{v} \mathbf{v})) \mathbf{v} (\mathbf{v} \mathbf{v}) \mathbf{v} \mathbf{v} (\mathbf{v} \mathbf{v}) \mathbf{v} \mathbf$				Director 10% Owner _X Officer (give title Other (specify elow) below) EVP			
			dment, Date h/Day/Year)	/Day/Year) Applicable _X_Form				al or Joint/Group Filing(Check .ine) led by One Reporting Person ed by More than One Reporting		
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		tion Date, if Transaction(A) or Disposed of Code (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Old Second Bancorp, Inc. Common Stock	02/18/2019		Code V J	Amount 2,422 (2)	(D) D	Price \$ 14.24	(Instr. 3 and 4) 15,361.054 (1)	D		
Old Second Bancorp, Inc. Common Stock							1,107	Ι	401-K	
Old Second Bancorp, Inc.Common Stock							375	I	Profit Sharing	

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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.

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

1. Title of	2. Conversion	3. Transaction Date		4. Transact	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu Dariy
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	(Instr. 8)	orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	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 / Addre	SS	Relationships						
	Director	10% Owner	Officer	Other				
Gottschalk Keith 37 S. RIVER ST. AURORA, IL 60506			EVP					
Signatures								
/s/ Keith Gottschalk ()2/18/2019							

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Included in this total are 4,578 shares held in Mr. Gottschalk's name outright, 9,729 shares of restricted stock units, 36.054 restricted stock equivalents and 1,018 shares held in a brokerage account.
- (2) These shares represent vested Restricted Stock Units from a 2016 Grant.

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.

<u>**</u>Signature of Reporting Person