OLD SECOND BANCORP INC

Form 4

January 09, 2015

FORM 4

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

OMB Number: 3235-0287

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

Form 4 or Form 5 obligations may continue.

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

30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Eccher James			2. Issuer Name and Ticker or Trading Symbol OLD SECOND BANCORP INC [OSBC]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 37 S. RIVEI	t) (First) (Middle) 3			3. Date of Earliest Transaction (Month/Day/Year) 01/09/2015			X Director 10% Owner Selection of the control of th		
AURORA, I	(Street) IL 60506		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			
(City)	(State)	(Zip)	Toble	a I. Non Dori	ivotivo So	ourities Ac	Person	of or Ronoficio	lly Owned
1.Title of Security (Instr. 3) Old Second Bancorp, Inc. Common Stock	2. Transaction D (Month/Day/Yea	eate 2A. Decenier) Execution		3. 4 TransactionA Code D	1. Securition Acquired (Disposed of Instr. 3, 4	es (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
Old Second Bancorp Inc. Common Stock							6,242	I	401-k
Old Second Bancorp							1,960	Ι	Profit Sharing

Edgar Filing: OLD SECOND BANCORP INC - Form 4

Plan Inc.

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 SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

8. I De Sec (In:

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)	tion Date, if TransactionNumber Expiration Date Code of (Month/Day/Year)		e	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		3 ()	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option	\$ 27.75					12/18/2008	12/18/2017	Common Stock	20,000	
Employee Stock Option	\$ 29.2					12/19/2007	12/19/2016	Common Stock	12,000	
Employee Stock Option	\$ 31.34					12/20/2005	12/20/2015	Common Stock	12,000	

Reporting Owners

Reporting Owner Name / Address	Keiauonsinps					
	Director	10% Owner	Officer	Other		
Eccher James						
37 S. RIVER ST.	X		COO			
AURORA, IL 60506						

2 Reporting Owners

Deletionshins

Signatures

/s/ James Eccher 01/09/2015

**Signature of Date
Reporting Person

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) Included in this total are 148 shares held jointly with spouse; 48,910 shares held in a brokerage account; 50 shares held in Mr. Eccher's name alone and 65,000 shares of restricted stock units in the name of Mr. Eccher.

Remarks:

Filing made voluntarily to remove 12,000 shares in Options that expired in December 2014.

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.

Signatures 3