### CENTRUE FINANCIAL CORP

Form 4

#### November 05, 2015 **OMB APPROVAL** UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 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 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading SOLON EVERETT J Issuer Symbol CENTRUE FINANCIAL CORP (Check all applicable) [CFCB] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Other (specify X\_ Officer (give title (Month/Day/Year) below) 122 W. MADISON STREET 11/04/2015 MARKET PRESIDENT (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting **OTTAWA, IL 61350** Person (C:tr.) (State) (7:-

(City)	(State) (Zi	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own							ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	(A)		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)	
COMMON STOCK	11/04/2015		Code V	Amount 2,031 (1)	A	Price \$ 17.75	(Instr. 3 and 4) 7,235	D	
COMMON STOCK	11/04/2015		F	616 (2)	D	\$ 17.75	6,619	D	
COMMON STOCK							1,175.88	I	BY 401K PLAN
COMMON STOCK							2,166	I	BY IRA

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

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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. 5. TransactionNumber Code of (Instr. 8) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3,				7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
PHANTOM STOCK	(3)					(3)	(3)	COMMON STOCK	189.0681
EMPLOYEE STOCK OPTION	<u>(4)</u>					<u>(4)</u>	<u>(4)</u>	COMMON STOCK	166

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SOLON EVERETT J 122 W. MADISON STREET OTTAWA, IL 61350

MARKET PRESIDENT

# **Signatures**

/s/Everett J. 11/05/2015 Solon

\*\*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) Transaction represents the grant of restricted stock to the reporting person under the Stock Compensation Plan. All shares are fully vested at 11/04/2015.
- (2) Transaction represents withholding of shares to satisfy withholding obligations upon vesting of restricted stock.

**(3)** 

Reporting Owners 2

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The shares of phantom stock become payable, in cash or common stock, at the election of the reporting person, upon the reporting person's termination of service.

(4) Stock options granted to the reporting person under the issuer's stock option plan.

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.