

STEVENSON KURT R  
Form 4  
February 08, 2008

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
STEVENSON KURT R

2. Issuer Name and Ticker or Trading Symbol  
CENTRUE FINANCIAL CORP  
[TRUE]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
122 W MADISON STREET  
(Street)

3. Date of Earliest Transaction (Month/Day/Year)  
02/07/2008

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
SR EXEC VICE PRES/CFO

OTTAWA, IL 61350  
(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Code V Amount (D) Price		
COMMON STOCK					1,325 <sup>(1)</sup>	D	
COMMON STOCK					6,770	I	401K PLAN

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.**

SEC 1474 (9-02)

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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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title
EMPLOYEE STOCK OPTION	\$ 15					02/11/2004	02/11/2009	COMMON STOCK
EMPLOYEE STOCK OPTION	\$ 11.75					02/15/2006	02/15/2011	COMMON STOCK
EMPLOYEE STOCK OPTION	\$ 14.25					11/13/2006	02/20/2012	COMMON STOCK
EMPLOYEE STOCK OPTION	\$ 15.09					11/13/2006	12/19/2012	COMMON STOCK
EMPLOYEE STOCK OPTION	\$ 20.3					11/13/2006	06/16/2015	COMMON STOCK
EMPLOYEE STOCK OPTION	\$ 19.6					11/13/2007	07/07/2013	COMMON STOCK
EMPLOYEE STOCK OPTION	\$ 17.63	02/07/2008		A	10,000	02/07/2009	02/07/2015	COMMON STOCK

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
STEVENSON KURT R 122 W MADISON STREET OTTAWA, IL 61350			SR EXEC VICE PRES/CFO	

## Signatures

KURT R.  
STEVENSON

02/08/2008

\_\_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).

- (1) ALL SHARES HELD JOINTLY WITH SPOUSE, EXCEPT FOR 900 SHARES HELD INDIVIDUALLY.
- (2) THIS OPTION WILL VEST IN EQUAL INSTALLMENTS OF 1500 SHARES PER YEAR OVER 5 YEARS.
- (3) THIS OPTION WILL VEST IN EQUAL INSTALLMENTS OF 2,000 SHARES PER YEAR OVER 5 YEARS.

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.