MidWestOne Financial Group, Inc.

Form 4

January 26, 2009

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB** Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

January 31, 2005

0.5

Estimated average burden hours per

response...

**OMB APPROVAL** 

Check this box if no longer subject to Section 16. Form 4 or Form 5

**SECURITIES** 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

Symbol

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

POTHOVEN JOHN P

1. Name and Address of Reporting Person \*

			MidWestOne Financial Group, Inc. [MOFG]			(Check all applicable)					
(Last) 102 SOUT	. , ,			ate of Earliest Transaction ath/Day/Year)				_X_ Directo Officer below)	or e (give titlebelo	10% Owner Other (specify	
IOWA CIT	(Street) 4. If Am			Amendment, Date Original 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	ole I - Non-	Derivativ	e Secu	ırities A	Acquired, Dispos	sed of, or Ben	eficially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 01/22/2009		ed Date, if	3.	4. Securi onAcquirec Disposed (Instr. 3,	ties l (A) o l of (D	or O)	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)	
Common Stock								600	I	Self/UTMA Custodian Minor Grandchildren	
Common Stock								14,999	I	By IRA	
Common Stock								34,663	I	By ESOP	

#### Edgar Filing: MidWestOne Financial Group, Inc. - Form 4

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)

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. Transactio Code (Instr. 8)	5. Dr.Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivat Security (Instr. 5
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 16.86					(2)	12/31/2012	Common Stock	4,750	
Stock Option	\$ 19.75					(2)	12/31/2013	Common Stock	4,987	
Stock Option	\$ 21.94					(2)	12/31/2014	Common Stock	4,750	
Stock Option	\$ 18.71					(2)	12/30/2015	Common Stock	2,375	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
POTHOVEN JOHN P 102 SOUTH CLINTON STREET IOWA CITY, IA 52240	X						

\*\*Signature of Reporting Person

# **Signatures**

Kenneth R. Urmie, as Power of Attorney dated January 22, 2009 01/26/2009

Reporting Owners 2

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).
- Registered to self as custodian for minor grandchildren under Uniform Transfers to Minors Act. The reporting person disclaims beneficial
- (1) ownership of these shares, and this report shall not be deemed an admission that the reporting person is the beneficial owner of these shares for purposes of Section 16 or for any other purpose.
- (2) Fully vested.

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.