FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287				
Estimated average burden					
hours per response:	0.5				

to Sec obligat	this box if no le tion 16. Form 4 tions may conti ction 1(b).	or Form 5	STATEME	d pursuar	nt to S	ection 16(a)	of the Se	ecuriti	es Exchang	e Act o	of 193		SHIP	Estim		er: verage burd sponse:	3235-0287 en 0.5
1. Name and Address of Reporting Person [*] Lemke Eric					2. Issuer Name and Ticker or Trading Symbol <u>Midland States Bancorp</u> , Inc. [MSBI]						(Ch	eck all app Direc	tor 10% C				
(Last) 1201 NE	``	rst) (I CENTRE DRIVE	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/01/2021							below	v)	below)			
(Street) EFFING (City)			2401 Zip)	- 4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	e) <mark>X</mark> Form Form	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Non-Deriv	ative S	ecur	ities Acq	uired,	Dis	posed of	, or E	Bene	eficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Code (Instr. 5)		es Acq Of (D) (juired (Instr.	(A) or 3, 4 an	d Securi Benefi Owned	Amount of ecurities eneficially wned Following		n: Direct r Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) (D)	or	Price		ed ction(s) 3 and 4)			(Instr. 4)
Common Stock ⁽¹⁾ 11/01/				/2021			A		5,456	I	A	\$ <mark>0</mark>	1	4,584		D	
		Ta	ble II - Deriva (e.g., p			ies Acqui varrants,							y Owne	d			
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		ansaction of ode (Instr. Derivative		Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Date Exercisable

Expiration Date

Explanation of Responses:

1. RSA with 4yr - 25% vesting schedule

Remarks:

<u>/s/ Lemke Eric</u>	<u>11/03/2021</u>
<u>/s/ Douglas J. Tucker,</u> <u>attorney-in-fact</u>	<u>11/03/2021</u>
** Signature of Reporting Person	Date

Amount or Number

of Shares

Title

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

* 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).

Code v (A) (D)

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.