FORM 4

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	
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$\overline{}$	Check this box if no longer subject to Section 16. Form 4
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Name and Address of Reporting Person     Lehman Gary					2. Issuer Name and Ticker or Trading Symbol FIRST MERCHANTS CORP [ FRME ]							5. Relation (Check all	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 1			ner	
(Last) 200 E JACKSON ST	(First)	(Mi	ddle)		3. Date of Earliest Transaction (Month/Day/Year) 11/03/2014								Officer (give title below) Other (specify below				
(Street) MUNCIE (City)	IN (State)	47305 (Zip)				If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
			7	able I -	Non-Der	ivative Se	curities A	cquired, Di	sposed of	f, or Benefi	icially Ow	ned					
					2. Transact Date (Month/Day	Execu	Execution Date,	3. Transaction Code (Instr. 8) 4. Secur 3, 4 and				```	) (Instr. 5. Amount of Securities Beneficially Owned Follow Reported Transaction(s)		nership Form: t (D) or Indirect (I)	7. Nature of Indirect Beneficia Ownership (Instr.	
Common Stock					11/03/2	(Mont	h/Day/Year)	Code V	Amount 74	4.967	(A) or (D)	Price (	22,263.356	(1)	D	4)	
				Table				uired, Disp , options, o				d		,		,	
1. Title of Derivative Security (Ins 3)	Conversion or Exercise Price of Derivative	onversion Date r Exercise (Month/Day/Year) in rice of	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 Securities Underly Derivative Security (Instr. 3 and 4)		rities Underlying and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficia Ownership (Instr. 4)	
l	Security			Code	v	(A)	(D)	Date Expiration Exercisable Date				Amount or Number of Share	15	Reported Transaction(s (Instr. 4)	s)		

Remarks:

Jennifer Mainord (Confirming Statement on

11/05/2014

File)
\*\* Signature of Reporting Person

Date

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).

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.

CONFIRMING STATEMENT

This statement confirms that the undersigned, Gary J. Lehman, has authorized and designated, Jennifer Mainord, Amanda C. Williams or Rhonda Bost, to execute and

\_\_/s/ Gary J. Lehman\_\_\_\_ Gary J. Lehman

Date: February 13, 2014