Edgar Filing: FIRST NORTHERN COMMUNITY BANCORP - Form 4

FIRST NOR' Form 4 April 21, 200	THERN COMM	UNITY E	BANCOR	ХР								
-									OMB A	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi if no long						Expires:	January 31,					
subject to Section 1 Form 4 of Form 5	6. r	TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES pursuant to Section 16(a) of the Securities Exchange Act of 1934,								timated average rden hours per sponse 0.5		
obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the l	Public Ut		ling Con	npany A	ct of	1935 or Section	1			
(Print or Type F	Responses)											
WALKER ROBERT M Sy FI			Symbol FIRST I	Name and NORTHE NOP [FNI	ERN CO	-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(First) (M				-			Director 10% Owner				
			(Month/D 04/19/20	-			XOfficer (give titleOther (specify below) below) EVP/Commercial, Retail & Trust					
			ndment, Da hth/Day/Year	-	I		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(State)	(Zip)	Tabl	e I - Non-D)erivative	Securities	s Acai	Person uired, Disposed of	or Beneficial	lv Owned		
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deem Execution any (Month/Da(Instr. 3)(Month/Day/Year)(Month/Day/Year)		ned n Date, if	3.	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or			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	04/19/2005			J <u>(1)</u>	14			39,955	I	One of three trustees of First Northern Bank of Dixon Profit Sharing Plan		
	04/20/2005			J <u>(2)</u>	4	А		39,959	I			

Common Stock Reminder: Report on a separate line for Table II		Persor inform require display numbe	ersons who respond to the collection of nformation contained in this form are not equired to respond unless the form isplays a currently valid OMB control umber.									
1. Title of 2. 3. Transaction Derivative Conversion (Month/Day, Security or Exercise (Instr. 3) Price of Derivative Security	on Date 3A. Deemed	4. Transactio Code (Instr. 8)	5.	6. Date Exerce Expiration Da (Month/Day/	ate	Unde Secur (Instr	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr			
Reporting Owners												
Reporting Owner Name / Address		Relation	nships									
	Director 10% Owner O	Officer			Othe	r						
WALKER ROBERT M P.O. BOX 547 195 N. FIRST STREET DIXON, CA 95620			EVP/Commercial, Retail & Trust									
Signatures												
Lynn Campbell, AVP/Corporate w/POA	e Secretary	04/21/20	05									
**Signature of Reporting Pers	on	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) Shares were given to 7 employees 2 shares each as "That's My Bank Day" incentives from First Northern Bank of Dixon Profit Sharing Plan where reporting person is one of three trustees.
- (2) Shares were incorrectly issued and were returned to First Northern Bank of Dixon Profit Sharing Plan where reporting person is one of three trustees.

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.