Edgar Filing: WALKER LOUISE A - Form 4

WALKER LOU	ISE A											
Form 4												
March 21, 2011												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSI								OMB APPROVAL				
	UNITE	D STAT		ES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287		
Check this box	X		-	OF CHANGES IN BENEFICIAL OWNERSHIP OF					Expires:	January 31,		
if no longer subject to	STAT	EMENT	OF CHANGES						Estimated average			
Section 16.		CURITIES					burden hours per					
Form 4 or Form 5									response	0.5		
obligations	-		o Section 16(a) o				•					
may continue.			he Public Utility I (h) of the Investm	•	- ·			5 or Section				
See Instruction 1(b).	n	30(ii) of the investin	ient Comj	Jany Act	. 01 1	940					
1(0).												
(Print or Type Respo	onses)											
1. Name and Address of Reporting Person <u>*</u> WALKER LOUISE A							5. R Issue	Relationship of Reporting Person(s) to uer				
			· · · · · · · · · · · · · · · · · · ·	FIRST NORTHERN COMMUNITY								
				BANCORP [FNRN]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earlie	st Transacti	on		X	_ Director	10% 0	Owner		
			(Month/Day/Year)					_X_ Officer (give title Other (specify below) below)				
195 NORTH FI	RST STRE	EET	03/17/2011				Delov	/	t/CEO/Director	r		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6 In	6. Individual or Joint/Group Filing(Check				
								Applicable Line)				
				_X_Fe				orm filed by One Reporting Person filed by More than One Reporting				
DIXON, CA 95	620						Perso		re than One Repo	orting		
(City)	(State)	(Zip)	Table I - No	on-Derivat	ive Securi	ties A	cquired	l, Disposed of,	or Beneficially	v Owned		
1.Title of Security			2A. Deemed	3.4. Securities Acqu				5. Amount of	6.	7. Nature		
(Instr. 3)	(Month/Day/Year)		Execution Date, if	Transaction(A) or Disposed of Code (D)				Securities Beneficially	Ownership Form:	of Indirect Beneficial		
			any (Month/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)			5)	Owned	Direct (D)	Ownership		
								Following	or Indirect	(Instr. 4)		
						(A)		Reported Transaction(s)	(I) (Instr. 4)			
				Col V	A	or	D. '	(Instr. 3 and 4				
Restricted Stock				Code V	Amount	(D)	Price					
Award/Common		2011		A <u>(1)</u>	3,158	А	\$	55,284	D			
Stock					-,		4.75					

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.

 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title ar Amount of Underlyir Securities (Instr. 3 a	of ng s	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	umber		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
i B	Director	10% Owner	Officer	Other				
WALKER LOUISE A 195 NORTH FIRST STREET DIXON, CA 95620	Х		President/CEO/Director					
Signatures								
Lynn Campbell, AVP/Corporat Secretary	e	03/21	/2011					
**Signature of Reporting Person		Da	ate					
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) Restricted Stock Award with four year cliff vesting or upon retirement whichever comes first.

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.