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WALKER ROBERT M

Form 4

December 11, 2008

FORM	1									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXC. Washington, D.C. 205						NGE (COMMISSION	OMB Number:	3235-028		
Check this if no longe	er .							JERSHIP OF	Expires:	January 31 200	
subject to Section 16 Form 4 or	б.	ENT OF C	SECURITIES SECURITIES					NERSIII OF	burden hou	Estimated average burden hours per	
Form 5 obligation may conti See Instru-1(b).	Filed purs s Section 17(a)		blic Util	ity Hold	ing Com	pany	Act o	ge Act of 1934, of 1935 or Section 40	response	. 0.	
(Print or Type R	esponses)										
WALKER ROBERT M Sy			2. Issuer Name and Ticker or Trading Symbol FIRST NORTHERN COMMUNITY BANCORP [FNRN]					5. Relationship of Reporting Person(s) to Issuer			
								(Check all applicable)			
195 N. FIRST STREET, P.O. BOX 12/				Earliest Tra y/Year))8	nsaction			Director 10% Owner Officer (give title Other (specify below) EVP/Commercial/Retail & Trust			
			. If Amendment, Date Original Filed(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) (Z	Zip)	Table 1	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) Execut any (Month		Oate, if	3. 4. Securi FransactionAcquired Code Disposed Instr. 8) (Instr. 3,		d (A) or d of (D) , 4 and 5)		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	12/11/2008			S <u>(1)</u>	44	D	\$ 6.6	82,061	I	One of three Trustees of First Northern Bank of	

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

Dixon Profit Sharing Plan

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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		3. Transaction Date (Month/Day/Year)		4. Transacti	5. onNumber	6. Date Exerc Expiration D		7. Title		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise		any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e	Month/Day/Year)		Underlying Securities (Instr. 3 and 4)	(Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

WALKER ROBERT M 195 N. FIRST STREET P.O. BOX 547 DIXON, CA 95620

EVP/Commercial/Retail & Trust

Signatures

Lynn Campbell, AVP/Corporate Secretary

12/11/2008

Date

**Signature of Reporting Person

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) These shares were given to 2 Employees as "Employee Recognition Awards" 22 shares each.

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.

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