Edgar Filing: FIRST NORTHERN COMMUNITY BANCORP - Form 4

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FIRST NOR Form 4 May 30, 200	THERN COM 7	IMUNITY I	BANCOR	ЪР							
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITE	D STATES	COMMISSION	OMB Number:	3235-0287						
Check th if no long subject to Section 1 Form 4 o Form 5	ger STAT 6. r	STATEMENT OF CHANGES IN BENEFICIAL OWNER SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Ad							Expires:January 31200Estimated averageburden hours perresponse0.		
obligation may cont <i>See</i> Instru 1(b).	ns Section	17(a) of the	Public Ut		ling Con	npany	Act of	1935 or Section	1		
(Print or Type F	Responses)										
ONSUM OWEN J Symbol			Symbol	Name and			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
		ORP [FNF		,11,110							
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)					X Director 10% Owner X Officer (give title Other (specify			
				05/30/2007				below) below) President/CEO			
				mendment, Date Original 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)	(Zip)	Tabl	o I Non D	orivotivo	Soour	itios Aca		or Bonoficial	ly Ownod	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	Date 2A. Deer ear) Executio any	ned	3.	4. Securi m(A) or Di (Instr. 3,	ties Ad sposed	cquired d of (D)	uired, Disposed of 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	
Common Stock	05/30/2007			<u>G(1)</u>	965	D	\$ 18.45	102,786	D		
Common Stock								327,901	Ι	One of Three Trustees for FNB Profit Sharing Plan & Trustee for Morris	

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Trust

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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivatives Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of lying	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	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ONSUM OWEN J P.O. BOX 547 195 N. FIRST STREET VACAVILLE, CA 95620	Х		President/CEO				
Signatures							
Lynn Campbell, AVP/Corporate Secretary w/POA			05/30/2007				

**Signature of Reporting Person

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) Donation to Dixon Community Church @\$18.45

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.