

DeBra Kimberly A
 Form 4
 February 09, 2018

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 DeBra Kimberly A

2. Issuer Name and Ticker or Trading Symbol
 FIRST NORTHERN COMMUNITY BANCORP [FNRN]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
 195 N. FIRST STREET, P.O. BOX 547
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 02/07/2018

____ Director
 Officer (give title below) _____ 10% Owner
 _____ Other (specify below)
 EVP/CorpCommuni,Sales & Mktg

DIXON, CA 95620

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 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 Ownership (Instr. 4)
			Code	V	Amount or Price		
Common Stock	02/07/2018		M/K ⁽²⁾		886 A \$ 5.08	22,819	D
Common Stock	02/07/2018		M/K ⁽³⁾		2,175 A \$ 6.47	22,819	D
Common Stock	02/07/2018		F/K		1,370 D \$ 13.55	22,819	D

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

SEC 1474 (9-02)

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. 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 Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares
Employee Stock Option (Right to Purchase)	\$ 5.08	02/07/2018		M ⁽²⁾	886	02/21/2017 ⁽¹⁾ 02/21/2023	Common Stock	886
Employee Stock Option (Right to Purchase)	\$ 6.47	02/07/2018		M ⁽³⁾	2,175	02/21/2017 ⁽¹⁾ 02/21/2024	Common Stock	2,175

Reporting Owners

Reporting Owner Name / Address	Relationships
DeBra Kimberly A 195 N. FIRST STREET P.O. BOX 547 DIXON, CA 95620	Director 10% Owner Officer EVP/CorpCommuni,Sales & Mktg

Signatures

Devon Camara-Soucy, VP/Corporate Secretary
Date: 02/09/2018

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) Stock Options Granted vest 0% upon their grant and 25% annually over 4 years.

Edgar Filing: DeBra Kimberly A - Form 4

- (2) Swapped 332 aged shares at \$13.55 for 886 Option shares at \$5.08 to gain a total of 554 shares.
- (3) Swapped 1,038 aged shares at \$13.55 for 2,175 Option shares at \$6.47 to gain a total of 1,137 shares.

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.