First Federal of Northern Michigan Bancorp, Inc.

Form 4 April 05, 2005

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB

Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

January 31, 2005

0.5

Estimated average

burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

obligations may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

First Federal of Northern Michigan

Symbol

1(b).

(Print or Type Responses)

THOMSON MARTIN A

1. Name and Address of Reporting Person *

					, Inc. [FF]		VIICIII	igan	(Check all applicable)		
(Last) (First) (Middle) 100 SOUTH SECOND AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 04/01/2005					X Director 10% OwnerX Officer (give title Other (specify below) President and CEO			
(Street) ALPENA, MI 49707			4. 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			
	(City)		(Zip)	Table	I - Non-De	orivative S	Securi	ties A <i>c</i> e	Person quired, Disposed o	of or Reneficia	lly Owned
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transaction Code (Instr. 8)	4. Securi	ties I (A) of I of (D 4 and (A) or	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)
	Stock, par value \$0.01 per share	04/01/2005			P	4,000	A	\$ 10	4,000	I	By Trust
	Common Stock, par value \$0.01 per share	04/01/2005			P	750	A	\$ 10	750	I	Jointly by spouse and daughter
	Common Stock, par value \$0.01 per share	04/01/2005			P	6,716	A	\$ 10	6,716	I	By 401(k)

Common

Stock, par value \$0.01 per share

35,213 (1) 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 displays a currently valid OMB control number.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transact: Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S	ate	7. Title Amour Underl Securit (Instr. 2	nt of ying	8. Price of Derivative Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title 1	Amount or Number of Shares	

Relationshins

Reporting Owners

Reporting Owner Name / Address	relativisings							
	Director	10% Owner	Officer	Other				

THOMSON MARTIN A

100 SOUTH SECOND AVENUE X President and CEO

ALPENA, MI 49707

Signatures

/s/ Martin A.

Thomson 04/04/2005

**Signature of Date
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) Reflects a 1.8477-to-1.00 stock split in connection with the Company's mutual to stock conversion

Reporting Owners 2

Edgar Filing: First Federal of Northern Michigan Bancorp, Inc. - Form 4

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.