First Federal of Northern Michigan Bancorp, Inc. Form 4 October 27, 2015

October 27,	2015											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
		<b>JSIAIES</b>	Washington, D.C. 20549							3235-0287		
Check th if no lon subject to Section 1 Form 4 of Form 5	this box nger to a 16. or STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES								Number: Expires: Estimated a burden hour response			
obligatio may con <i>See</i> Instr 1(b).	tinue. Section 1' uction	7(a) of the	Public U		ding Cor	npan	y Act of	1935 or Section	1			
(Print or Type)	Responses)											
Smith Eric G. Symbo			Symbol	r Name <b>and</b> deral of N				5. Relationship of Reporting Person(s) to Issuer				
			p, Inc. [FFNM]				(Check all applicable)					
(Last)         (First)         (Middle)         3. Date of (Month/D           100 SOUTH SECOND AVE         10/27/2				-				X_ Director 10% Owner Officer (give title Other (specify below) below)				
				ndment, Date Original hth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>				
(City)	(State)	(Zip)	Tab	le I - Non-D	Derivative	Secui	rities Aca	uired, Disposed of,	or Beneficiall	v Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				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		
Common Stock, par value \$0.01 per share	10/27/2015			Р	1,000	A	\$ 6.4899	5,514	I	By IRA		
Common Stock, par value \$0.01 per share								24,613	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.

 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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	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

 Smith Eric G.
 100 SOUTH SECOND AVE
 X
 X
 X
 X

 ALPENA, MI 49707
 X
 X
 X
 X
 X

 Signatures
 /s/ Steven T. Lanter, pursuant to power of attorney
 10/27/2015
 10/27/2015

\*\*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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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