First Federal of Northern Michigan Bancorp, Inc.

Form 4

per share Common Stock, par

value \$0.01

per share

March 23, 2006

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box							Expires:	January 31,			
subject to	SIAIEM	NGES IN BENEFICIAL OW SECURITIES				NERSHIP OF	Estimated a				
Section 16 Form 4 or	SECOR	IIIES				burden hou response	•				
Form 5 obligations may continue.  See Instruction 1(b).  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 R	esponses)										
VANMASSENHOVE GARY C Symbol First F			2. Issuer Name and Ticker or Trading Symbol First Federal of Northern Michigan Bancorp, Inc. [FFNM]				5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)				
			of Earliest Tra Day/Year) 2006	insaction			X Director Officer (give below)	Officer (give title Other (specify			
ALPENA, M	nendment, Dat onth/Day/Year)	_	l		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) Ta	ble I - Non-De	erivative :	Securi	ities Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year)		Code	Transaction(A) or Disposed of Code (D)			Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Stock, par value \$0.01 per share	03/21/2006		P	192	A	\$ 9.48	642	I	By IRA		
Common Stock, par value \$0.01							4,408	D			

By spouse

IRA

450

I

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

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)

<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	]
	Derivative				Securities	1		(Instr.	3 and 4)		(
	Security				Acquired						]
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	on	Number		
				Exercisable	Date	of					
				Code V	(A) (D)				Shares		
				Code v	(A) $(D)$				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<b>FB</b>	Director	10% Owner	Officer	Other			
VANMASSENHOVE GARY C							
100 SOUTH SECOND AVENUE	X						
ALPENA, MI 49707							

## **Signatures**

/s/ Robert B. Pomerenk, pursuant to power of attorney 03/23/2006

\*\*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. 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.

Reporting Owners 2