First Bancorp, Inc /ME/ Form 4 August 09, 2016

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or January 31,

Expires: 2005

Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

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

1(b).

Stock

(Print or Type Responses)

| 1. Name and Address of Reporting Person * SMITH STUART G | | | Symbol | er Name an ancorp. I | | | | 5. Relationship of Issuer | | | | |
|--|--|--|---|--------------------------------|--|---|-------------|---|--|---|--|--|
| (Last) (First) (Middle) | | | First Bancorp, Inc /ME/ [FNLC] | | | | | (Check all applicable) | | | | |
| PO BOX 940 | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2016 | | | | | _X_ Director 10% Owner Officer (give title below) Other (specify below) | | | | |
| (Last) (First) (Middle PO BOX 940 (Street) DAMARISCOTTA, ME 04543 (City) (State) (Zip) 1.Title of 2. Transaction Date 2A. I Security (Month/Day/Year) Executive (Instr. 3) Execution and Security (Month/Day/Year) Execution E | | | 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 | | | | |
| DAMARISCOTTA, ME 04543 | | | | | | | | Form filed by More than One Reporting Person | | | | |
| (City) | (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| Security | | | Date, if | Code (Instr. 8) | 4. Securities Acquired action(A) or Disposed of (D) (Instr. 3, 4 and 5) 8) (A) or 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 Beneficial Ownership (Instr. 4) | | |
| | 08/05/2016 | | | P | 500 | A | \$ 21.84 | 101,356.0862 | D | | | |
| | | | | | | | | 2,550.2209 | I | Through Employee Stock Purchase Plan | | |
| Common | | | | | | | | 456 | ī | Ry Spouse | | |

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 (9-02)

456

Ι

By Spouse

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exer | cisable and | 7. Titl | le and | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|------------|------------|-----------------|-------------|---------|--------------|-------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transacti | onNumber | Expiration Date | | Amou | ınt of | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | rlying | Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivativ | e | | Secur | ities | (Instr. 5) | Bene |
| | Derivative | | | | Securities | 3 | | (Instr. | . 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | | | | Amount | | |
| | | | | | | Date | Expiration | Title | or Number | | |
| | | | | | | Exercisable | Date | Title | of | | |
| | | | | Codo V | (A) (D) | | | | | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SMITH STUART G PO BOX 940 X DAMARISCOTTA, ME 04543

Signatures

Stuart G. Smith 08/05/2016

**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