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FIRST BAN	ICORP /NC/											
Form 4												
May 15, 201	15											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL					
	• UNITED	STATES					NGE C	OMMISSION	OMB	3235-0287		
Check th	nis box		Was	shington	, D.C. 20	9549			Number:			
if no lon	gor		E CILAN	ICES IN	DENIER	ICIA		IEDSIIID OF	Expires:	January 31, 2005		
subject t	.0		г спар		GES IN BENEFICIAL OWNERSHIP O SECURITIES					Estimated average		
Section Form 4 (SECU	MIIES				burden hour	rs per 0.5		
Form 5		suant to S	Section 1	6(a) of th	ne Securi	ties F	Exchange	e Act of 1934,	response 0.			
obligatio	ons Section 17(•	1935 or Sectior	n			
may con See Instr	lunue.			vestment	•	· ·	•		-			
1(b).	luction				1	2						
(Print or Type	Responses)											
1 Name and	Address of Reporting	Person *	2 I	N	1.77. 1	т I'		5 Relationship of	Penorting Pers	on(s) to		
				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			Symbol FIRST	BANCO	RP/NC/	IFBN	JCI					
(Leet)	(F :							(Check	all applicable)		
(Last)	(First) (I	Middle)		f Earliest T	ransaction			_X_ Director	10%	Owner		
3604 WILLIAMSBOROUGH CT. 05/11/2				Day/Year) 2015				Officer (give title Other (specify				
			03/11/2	015				below)	below)			
(Street) 4. If			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mor	nth/Day/Yea	r)			Applicable Line) _X_ Form filed by O	no Poporting Do			
RALEIGH,	NC 27600							Form filed by O				
KALLIOII,	, INC 27009							Person				
(City)	(State)	(Zip)	Tabl	le I - Non-l	Derivative	Secur	rities Acqu	uired, Disposed of	or Beneficial	y Owned		
1.Title of	2. Transaction Date	A. Deen	ned	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	n Date, if Transaction(A) or Disposed of (D)					Securities	Ownership	Indirect			
(Instr. 3)		any (Month/E	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned		Beneficial Ownership		
		(WIOIIII/L	Jay/ I cal)	(111511.0)				Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)	. ,		
						or		Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D)	Price	(111su. 5 and 4)				
Common	05/11/2015			Р	1,300	А	\$ 15.86	1,300	D			
Stock												
Common	05/12/2015			Р	1,850	А	\$	3,150	D			
Stock	03/12/2013			1	1,050	11	15.795	5,150	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. iorNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting O wher Funct / Functions	Director	10% Owner	Officer	Other			
Sloan O. Temple III 3604 WILLIAMSBOROUGH CT. RALEIGH, NC 27609	Х						
Signatures							
/s/ Timothy S. Maples, Attorney-in-fact	C	5/15/2015					
**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. 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.