

Edgar Filing: MARTIN MICHAEL T - Form 5

MARTIN MICHAEL T  
 Form 5  
 January 27, 2003

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 WASHINGTON, D.C. 20549  
 FORM 5

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

( ) Check box if no longer subject to Section 16.

Form 4 or Form 5 obligations may continue. See Instructions 1(b).

( ) Form 3 Holdings Reported

(X) Form 4 Transactions Reported

1. Name and Address of Reporting Person

Michael T. Martin  
 PO Box 940  
 Damariscotta ME 04543-0940

2. Issuer Name and Ticker or Trading Symbol

First National Lincoln Corporation FNLC

3. IRS or Social Security Number of Reporting Person (Voluntary)

4. Statement for Month/Year

12/02

5. If Amendment, Date of Original (Month/Year)

6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

( ) Director ( ) 10% Owner (X) Officer (give title below) ( ) Other  
 (specify below) Senior Vice President - Credit Admin Officer

7. Individual or Joint/Group Reporting (Check Applicable Line)

(X) Form filed by One Reporting Person  
 ( ) Form filed by More than One Reporting Person

Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security	2. Transaction Date	3. Code	4. Securities Acquired (A) or Disposed of (D) Amount	5. Amount of Securities Beneficially Owned at End of Year Price
Common Stock	11-15-02	P	21	A   \$31.75   2,603

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	4. Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) Amount	6. Date Exercisable and Expiration Date Date (Month/Day/Year) Date (Month/Day/Year)	7. Title and Amount of Underlying Securities Title and Number of Shares	8. Percentage of Total Ownership
---------------------------------	--	---------------------	---------	--	---	--	----------------------------------

Edgar Filing: MARTIN MICHAEL T - Form 5

---

Explanation of Responses:

SIGNATURE OF REPORTING PERSON

/s/ Michael T. Martin

DATE

01/23/03