## Edgar Filing: FIRST BANCORP /NC/ - Form 4

| FIRST BAN<br>Form 4  | NCORP /NC/   |   |   |  |        |               |   |  |   |  |  |
|--|--|---|---|--|--------|---------------|---|--|---|--|--|
| August 20,   | 2009   |   |   |  |        |               |   |  |   |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE C   |  |   |   |  |        |               |   | OMB A  | MB APPROVAL   |  |  |
|  | UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549                 |   |   |  |        |               | OMMISSION   | OMB<br>Number:   | 3235-0287   |  |  |
| Check t<br>if no lor<br>subject<br>Section<br>Form 4<br>Form 5<br>obligati<br>may con<br><i>See</i> Inst | nger<br>to<br>16.<br>or<br>Filed pur<br>ons<br>ntinue.                                     | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |   |  |        |               |   |  |   |  |  |
| 1(b).  |  |   |   |  |        |               |   |  |   |  |  |
| (Print or Type   | Responses)   |   |   |  |        |               |   |  |   |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>WALLACE GOLDIE H                                     |  |   | 2. Ibbaer Flaine and Fleiner of Flading |  |        |               | 5. Relationship of Reporting Person(s) to Issuer  |  |   |  |  |
| (Last)   | (First) (  |   | 3. Date of Earliest Transaction         |  |        |               | (Check all applicable)  |  |   |  |  |
| (Last) (First) (Middle)<br>(Street)  |  |   | (Month/Day/Year)<br>08/18/2009          |  |        |               | XDirector10% Owner<br>Officer (give titleOther (specify<br>below)Dther (specify   |  |   |  |  |
|  |  |   | Filed(Month/Day/Year)                   |  |        |               | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person                  |  |   |  |  |
| (City)   | (State)  | (Zip)   | Table I - Non-l                         | Derivativ  | e Secu | rities Acqu   | iired, Disposed of,   | , or Beneficial  | ly Owned  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | Title of<br>ecurity2. Transaction Date<br>(Month/Day/Year)2A. Deemed<br>Execution Date, if |   | Code<br>(Instr. 8)                      | Transactionor Disposed of (D)<br>Code (Instr. 3, 4 and 5)<br>(Instr. 8)<br>(A)<br>or |        |               | <ul> <li>5. Amount of<br/>Securities</li> <li>Beneficially</li> <li>Owned</li> <li>Following</li> <li>Reported</li> <li>Transaction(s)</li> <li>(Instr. 3 and 4)</li> </ul> | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Common   |  |   | Code V                                  |  | (D)    | Price         |   |  |   |  |  |
| Stock  | 08/18/2009   |   | S                                       | 500  | D      | \$ 18.23      | 136,132   | D  |   |  |  |
| Common<br>Stock  | 08/18/2009   |   | S                                       | 100  | D      | \$<br>18.2101 | 136,032   | D  |   |  |  |
| Common<br>Stock  | 08/18/2009   |   | S                                       | 400  | D      | \$<br>18.2116 | 135,632   | 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.

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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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Under<br>Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|----------------|--|---|---|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title          | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |         |       |  |  |  |  |
|---------------------------------|---------------|-----------|---------|-------|--|--|--|--|
|                                 | Director      | 10% Owner | Officer | Other |  |  |  |  |
| WALLACE GOLDIE H                |               |           |         |       |  |  |  |  |
|                                 | Х             |           |         |       |  |  |  |  |
| Signatures                      |               |           |         |       |  |  |  |  |
| /s/ Timothy S. Maples,          |               |           |         |       |  |  |  |  |
| Attorney-in-fact                |               | 08/20/20  | 09      |       |  |  |  |  |
| **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.