FIRST CAPITAL INC

Form 4 May 31, 2006

FORM 4

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

OMB 3235-0287 Number:

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

Estimated average

See Instruction

1(b).

(Print or Type Responses)

	1. Name and Ad UHL SAMU	ldress of Reporting l EL E	Person * 2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
				FIRST CAPITAL INC [(FCAP)]			(Check all applicable)			
	(Last)	(First) (N	Middle) 3. Date of	Earliest Tra	ansaction					
			(Month/D	(Month/Day/Year) 05/30/2006			10%	Owner		
	220 FEDER	AL DRIVE	05/30/20				X Officer (give title Other (specify below) Chief Operating Officer			
		(Street)	4. If Ame	4. If Amendment, Date Original		6. Individual or Joint/Group Filing(Check				
			Filed(Mor	Filed(Month/Day/Year)		Applicable Line)				
CORYDON, IN 47115							_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
	(City)	(State)	(Zip) Tabl	e I - Non-D	erivative Securities Acq	quired, Disposed o	f, or Beneficial	ly Owned		
	1.Title of	2. Transaction Date	e 2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of		
	Security	(Month/Day/Year)	Execution Date, if	Transactio	on(A) or Disposed of	Securities	Form: Direct	Indirect		
	(Instr. 3)		any	Code	(D)	Beneficially	(D) or	Beneficial		
			(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership		
						Following	(Instr. 4)	(Instr. 4)		

Security	(Monuli Day i Cai)	Execution Date, ii	Transactio	n(A) of Disposed of	Securities	Tom. Direct	manect
(Instr. 3)		any	Code	(D)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership
					Following	(Instr. 4)	(Instr. 4)
				(A)	Reported		
				(A)	Transaction(s)		
			Code V	or Amount (D) Price	(Instr. 3 and 4)		
Common Stock	05/30/2006		P	100 A \$ 18.8	24,275.743	I	By IRA
Common Stock					11,386	D	
Common Stock					2,126.149	I	By ESOP
Common Stock					200	Ι	By Spouse

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative			7. Title and A Underlying S (Instr. 3 and	Securities 1
	Derivative Security				Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Incentive Stock Option (right to buy)	\$ 11					02/14/2001(1)	02/14/2010	Common Stock	6,250

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting o where runner, reduces	Director	10% Owner	Officer	Other			
UHL SAMUEL E 220 FEDERAL DRIVE CORYDON, IN 47115	X		Chief Operating Officer				

Signatures

/s/ Uhl, Samuel
E.

**Signature of Reporting Person

O5/31/2006

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).
- (1) Options are fully vested and exercisable as of February 14, 2005.

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.

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