Farr Robert E Form 4 December 16, 2010

OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB Washington, D.C. 20549 Number: Check this box Expires: if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Birmingham Bloomfield Bancshares

Symbol

[BBBI]

(Print or Type Responses)

1. Name and Address of Reporting Person *

1(b).

Farr Robert E

See Instruction

| (Last) | (First) | (Middle) | 3 Date of | Farliest Tr | ansaction | | | _X_ Director | 10% | 6 Owner | |
|--------------------------------------|--|---------------|---|---|---|----------------------|------------|--|--|---|--|
| ` , | DWARD AVE | | 3. Date of Earliest Transaction (Month/Day/Year) 12/14/2010 | | | | | X Officer (give title Other (specify below) President and CEO | | | |
| | (Street) 4. If Amendment Filed(Month/Day | | | | ment, Date Original /Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| BIRMINGHAM, MI 48009 | | | | | | | | Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Secur | ities Acc | quired, Disposed o | of, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | Execution any | emed on Date, if /Day/Year) | 3. Transaction Code (Instr. 8) | 4. Secur on(A) or D (D) (Instr. 3, | ispose, 4 and (A) or | d of | 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) | |
| Common Stock | 12/14/2010 | | | P | 500 | A | \$ 3.25 | 8,486 | D | | |
| Common Stock | | | | | | | | 2,000 | I | By Wife | |
| Common Stock | | | | | | | | 550 | I | By Child (Sarah) | |
| Common Stock | | | | | | | | 550 | I | By Child (David) | |
| Common Stock | | | | | | | | 550 | I | By Child (Grace) | |
| | | | | | | | | | | | |

3235-0287

January 31,

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

2005

0.5

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| Common Stock | 7,026 | I | John M. Farr Trust |
|-----------------|-------|---|-----------------------|
| Common Stock | 1,000 | I | Phyliss Farr Trust |

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transactic Code (Instr. 8) | 5. Dr.Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Title Amour Underl Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) |
|---|---|--------------------------------------|---|--|--|---------------------|--------------------|--|--|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|-------------------|-------|--|--|--|
| • 0 | Director | 10% Owner | Officer | Other | | | |
| Farr Robert E | | | | | | | |
| 33583 WOODWARD AVENUE | X | | President and CEO | | | | |
| BIRMINGHAM, MI 48009 | | | | | | | |

Signatures

Timothy E. Kraepel, Attorney-in-Fact

**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.

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