Edgar Filing: TOMPKINS FINANCIAL CORP - Form 4

Form 4	FINANCIAL C	ORP	-						
Form 4 July 12, 2016 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								N OMB Number: Expires: Estimated burden hou response	urs per
(Print or Type F	Responses)								
1. Name and A BATTAGLI	2. Issuer Name and Ticker or Trading Symbol TOMPKINS FINANCIAL CORP [TMP]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) TOMPKINS CORPORA	3. Date of Earliest Transaction (Month/Day/Year) 07/08/2016			X_ Director 10% Owner Officer (give title Other (specify below) below)					
	4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
ITHACA, N	IY 14851						Person	wore than one K	epotting
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned
	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	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)
Reminder: Rep	ort on a separate line	for each cl	ass of sec	urities bene	ficially ow	ned 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)								
	Tab					posed of, or convertible	Beneficially Ownersecurities)	d	

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	2
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	iorDerivative	Expiration Date	Underlying Securities]

1

8 D

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) of Disposed of (D (Instr. 3, 4, and 5)	r)	(Month/Day/Year)		(Instr. 3 and 4) S	
				Code V	(A) (E) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	07/08/2016		А	236.514	<u>(1)</u>	<u>(1)</u>	Common Stock	236.514	

Reporting Owners

Reporting Owner Name / Address		Relationships					
I B	Director	10% Owner	Officer	Other			
BATTAGLIA PAUL TOMPKINS FINAN P O BOX 460 ITHACA, NY 14851	Х						
Signatures							
/s/ Paul J. Battaglia	07/12/2016						
<u>**</u> 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).

Each share of phantom stock is the economic equivalent of one share of common stock. Phantom stock represents deferred stock compensation under the Amended and Restated Retainer Plan for Eligible Directors of Tompkins Financial Corporation and its

- (1) Compensation under the America and Restated Retainer Fran for Engible Directors of Fompkins Finaletial Corporation and its Wholly-Owned Subsidiaries. These shares are held in a rabbi trust pending distribution upon the occurrence of certain events specified in the Plan. The reporting person has no voting or investment power over the shares prior to such distribution.
- (2) Includes shares acquired through reinvestment of quarterly dividends.

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.