### Edgar Filing: TOMPKINS FINANCIAL CORP - Form 3

#### TOMPKINS FINANCIAL CORP Form 3 February 26, 2014 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549 OMB

### INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Angelis Stephen M	2. Date of Event Requiring Statement (Month/Day/Year)	<sup>3</sup> 3. Issuer Name <b>and</b> Ticker or Trading Symbol TOMPKINS FINANCIAL CORP [TMP]			
(Last) (First) (Middle	02/18/2014	4. Relationship Person(s) to Is		g 5. If Amendment, Date Original Filed(Month/Day/Year)	
TOMPKINS FINANCIAL CORPORATION, P.O.BOX		(Check	all applicable)	e)	
460 (Street) ITHACA, NY 14851		Director X Officer (give title below Pres. Tomp	Othe	elow) Filing(Check Applicable Line)	
(City) (State) (Zip)	Table I - I	Non-Derivati	ive Securit	ties Beneficially Owned	
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock	1,000		D	Â	
Reminder: Report on a separate line f owned directly or indirectly.	or each class of securities benefic	ially SI	EC 1473 (7-02	2)	
information c required to re	respond to the collection of ontained in this form are no spond unless the form disp I OMB control number.	t			
Table II - Derivative S	ecurities Beneficially Owned (a	e.g., puts, calls,	warrants, op	ptions, convertible securities)	

1. Title of Derivative Se	ecurity 2.	. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	E	xpiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(M	/Ionth/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
			(Instr. 4)	Price of	Derivative	
				Derivative	Security:	

# OMB APPROVAL

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships				
		Director	10% Owner	Officer	Other	
Angelis Stephen M TOMPKINS FINANCIAL CORPORATION P.O.BOX 460 ITHACA, NY 14851		Â	Â	Pres. Tomp. Finan. Advisors	Â	
Signatures						
/s/ Stephen M. Angelis	02/21/2014					
<u>**</u> Signature of Reporting Person	Date					
TOMPKINS FINANCIAL CORPORATION P.O.BOX 460 ITHACA, NY 14851 Signatures /s/ Stephen M. Angelis <u>**</u> Signature of Date		Â	Â	Pres. Tomp. Finan. Advisors	Â	

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 5(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.