Edgar Filing: SPAIN MICHAEL H - Form 4

SPAIN MICHAE	EL H											
Form 4 October 09, 2012	,											
									PPROVAL			
FORM 4	UNITED	STATES		RITIES A shington.			COMMISSION		3235-0287			
Check this box	x		vva	ishington	, D.C. 20	349			January 31,			
if no longer subject to Section 16. Form 4 or								Estimated burden hor	Expires: 2005 Estimated average burden hours per response 0.5			
Form 5 obligations may continue. See Instruction 1(b). 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 Respo	onses)											
1. Name and Address of Reporting Person <u>*</u> SPAIN MICHAEL H			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
		TOMPKINS FINANCIAL CORP [TMP]				(Check all applicable)						
			3. Date of Earliest Transaction				X_ Director 10% Owner Officer (give title Other (specify					
TOMPKINS FIL CORPORATIO		460	(Month/I 10/05/2	Day/Year) 2012			below)	below)				
	(Street)			endment, Da	-	l	6. Individual or	Joint/Group Fili	ing(Check			
F ITHACA, NY 14851				onth/Day/Yea	r)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
	+0.01						Person					
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned			
	ansaction Date nth/Day/Year)	Execution any	Date, if	3. Transaction 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: Report of	n a senarate line	for each cla	ass of seci	urities benef	icially own	ed directly o	or indirectly					
					Person inform require	ns who res ation cont ed to respo ys a currer	pond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)			
	Tab					posed of, or	Beneficially Owner	1				

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof	Expiration Date	Underlying Securities	Derivati

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr.	Code Derivative (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Security (Instr. 5)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	10/05/2012		Р		110		<u>(1)</u>	(1)	Common Stock	110	\$ 40.9
Phantom Stock	<u>(1)</u>	10/05/2012		L	V	34 (2)		(1)	<u>(1)</u>	Common Stock	34	\$ 39.1

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
SPAIN MICHAEL H TOMPKINS FINANCIAL P O BOX 460 ITHACA, NY 14851	CORPORATION	Х					
Signatures							
/s/ Michael H.	10/09/2012						
Spain	10/09/2012						

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** 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 than for Engliste Directors of Tompkins Financial 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) Shares acquired through reinvestment of quarterly cash 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.