KREIENBERG WILLIAM L

Form 4

February 26, 2019

FORM 4

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

OMB 3235-0287

OMB APPROVAL

Check this box if no longer subject to

Number: January 31, 2005

Section 16.
Form 4 or
Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per

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

response... 0.5

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person ** KREIENBERG WILLIAM L			Symbol		Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			[FISI]	011 12 11 ((Che	ck all applicable	e)		
(Last)	(First)	(Middle)		f Earliest T	ransaction	Director 10% Ow _X Officer (give title Other (s)				
220 LIBERTY STREET			(Month/E 02/24/2	•		below)	below)	` 1		
220 LIDLN	III SIREEI		02/24/2	019		Execut	tive Vice Presid	ent		
	(Street)		4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)			Applicable Line)	O D			
W. D. D. W. N. 14560						_X_ Form filed by One Reporting Person Form filed by More than One Reporting				
WARSAW, NY 14569						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative Securities Acq	quired, Disposed o	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ite 2A. Dee	emed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature		
Security	(Month/Day/Yea	r) Executi	on Date, if	Transacti	on(A) or Disposed of (D)	Securities	Form: Direct	Indirect		
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Beneficial		
		(Month	Day/Year)	(Instr. 8)		Owned	Indirect (I)	Ownership		

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	02/24/2019	02/25/2019	M	1,313	A	<u>(1)</u>	2,748	D	
Common Stock	02/24/2019	02/25/2019	F	446	D	\$ 30.38	2,302	D	
Common Stock							20,503	I	Held in IRA
Common Stock							1,027 (2)	I	Held in 401K Plan

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

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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 Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(1)</u>	02/24/2019	02/25/2019	M	1,313	02/24/2019	02/24/2019	Common Stock	1,313

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

KREIENBERG WILLIAM L 220 LIBERTY STREET WARSAW, NY 14569

Executive Vice President

Signatures

Michael D. Grover, by power of attorney

02/26/2019

**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).
- (1) Restricted stock units convert into shares of common stock on a one-for-one basis.
- (2) Includes 248 shares acquired under the FISI 401(k) plan since the date of the reporting person's last ownership report.

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.

Reporting Owners 2