HYLAND ROSEMARY G.
Form 3
May 03, 2012

FORM 3

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

OMB APPROVAL

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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 *
Â HYLAND ROSEMARY G.
(Last) (First) (Middle)

C/O TOMPKINS FINANCIAL CORPORATION,Â P O BOX 460
(Street)

ITHACA,Â NYÂ 14851
(City) (State) (Zip)

2. Date of Event Requiring Statement (Month/Day/Year)
04/24/2012

3. Issuer Name **and** Ticker or Trading Symbol
TOMPKINS FINANCIAL CORP [TMP]

4. Relationship of Reporting Person(s) to Issuer
(Check all applicable)

_____ Director
_____ 10% Owner
__X__ Officer (give title below)
_____ Other (specify below)
SVP, Human Resources

5. 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 Person

Table I - Non-Derivative Securities Beneficially Owned

1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	1,511	D (1)	Â
Common Stock	2,607	I	By 401(K)/ESOP

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

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (*e.g.*, puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership

	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Incentive Stock Option (Right to Buy)	Â (2)	05/03/2014	Common Stock	3,594	$ 35.77	D	Â
Incentive Stock Option (Right to Buy)	Â (3)	01/23/2016	Common Stock	3,630	$ 38.54	D	Â
Incentive Stock Option (Right to Buy)	Â (3)	11/29/2017	Common Stock	3,300	$ 37.28	D	Â
Stock Appreciation Rights (SAR)	Â (4)	09/17/2019	Common Stock	1,760	$ 41.71	D	Â
Stock Appreciation Rights (SAR)	Â (4)	08/19/2021	Common Stock	1,300	$ 37	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HYLAND ROSEMARY G. C/O TOMPKINS FINANCIAL CORPORATION P O BOX 460 ITHACA,Â NYÂ 14851	Â	Â	Â SVP, Human Resources	Â

Signatures

Rosemary G. Hyland	05/03/2012
**Signature of Reporting Person	Date

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).

(1) Includes 608 shares of Restricted Stock granted pursuant to the Tompkins Financial Corporation 2009 Equity Plan. Restricted Stock grants have a seven year vesting schedule with 0% vesting in year one, 17% vesting in years two through six, and 15% vesting in year seven. The grant will expire ten years from the date of the grant.

(2) The stock option becomes exercisable in four annual installments commencing two years after the date of grant.

(3) The stock option becomes exercisable in six annual installments commencing two years after the date of grant.

(4) Stock Appreciation Rights (SARs) were granted pursuant to the Tompkins Financial Corporation 2009 Equity Plan. SARs have a seven year vesting schedule with 0% vesting in year one, 17% vesting in years two through six, and 15% vesting in year seven. When exercised, the SARs will be settled in Common Stock of the Company. The grant will expire ten years from the date of the grant.

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.