## Edgar Filing: HOLLIDAY SUSAN R - Form 4

| April 10, 2018   |   |  |  |  |
|--|---|--|--|--|
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPRO<br>Washington, D.C. 20549 OMB Number: 32   | OVAL<br>235-0287  |  |  |  |
| Check this box<br>if no longer<br>subject to<br>SECURITIES<br>SECURITIES<br>Langer<br>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>Expires: Jar<br>Expires: Jar<br>Expires: Jar  | Expires:January 31,<br>2005Estimated average<br>burden hours per<br>response0.5 |  |  |  |
| (Print or Type Responses)  |   |  |  |  |
| 1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading       5. Relationship of Reporting Person(s)         HOLLIDAY SUSAN R       Symbol       Issuer         FINANCIAL INSTITUTIONS INC       [FISI]       (Check all applicable)                               |   |  |  |  |
| (Last)       (First)       (Middle)       3. Date of Earliest Transaction       _X_ Director       _10% Own         (Month/Day/Year)       (Month/Day/Year)      Officer (give title below)      Other (spectrum)         220 LIBERTY STREET       04/06/2018       04/06/2018      Other (spectrum) |   |  |  |  |
| Filed(Month/Day/Year) Applicable Line)<br>_X_ Form filed by One Reporting Person   |   |  |  |  |
| WARSAW, NT 14309 Person  | 6   |  |  |  |
| (City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Ov</b>  | vned  |  |  |  |
| (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Indirect (I) Owr<br>Following (Instr. 4) (Instr. 4) (Instr. 4)<br>(A) Transaction(s)   | ect<br>eficial<br>ership  |  |  |  |
| Common<br>Stock         04/06/2018         Code         V         Amount         (D)         Price         (Instr. 3 and 4)           M         2,000         A         \$ 19         24,186         D   |   |  |  |  |

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

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5. Number<br>on f Derivativ<br>Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | (Month/Day/Yea          |                    | 7. Title and A<br>Underlying S<br>(Instr. 3 and | Securities                             |
|---|---|---|---|--|--|-------------------------|--------------------|---|--|
|   |   |   |   | Code V                                 | (A) (D)  | Date Exercisable        | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |
| Stock<br>Option<br>(right to<br>buy)                | \$ 19   | 04/06/2018                              |   | М                                      | 2,000  | ) 05/06/2009 <u>(1)</u> | 05/06/2018         | Common<br>Stock                                 | 2,000                                  |

## **Reporting Owners**

| Reporting Owner Name / Address                             | Relationships |            |         |       |  |  |
|--|---------------|------------|---------|-------|--|--|
|  | Director      | 10% Owner  | Officer | Other |  |  |
| HOLLIDAY SUSAN R<br>220 LIBERTY STREET<br>WARSAW, NY 14569 | Х             |            |         |       |  |  |
| Signatures   |               |            |         |       |  |  |
| Michael D. Grover, by power of attorney                    | of            | 04/10/2018 |         |       |  |  |
| **Signature of Reporting Person                            |               | Dat        | te      |       |  |  |

## **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) Option vested in three equal annual installments beginning on May 6, 2009.

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.