Mucenski Edward S. Form 4 December 20, 2012

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

Check this box if no longer

subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

STATEMENT OF CHANGES IN 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

1(b).

(Last)

(City)

1.Title of

Security

(Instr. 3)

(Print or Type Responses)

Mucenski Edward S.

(First) (Middle)

10 RIDGEWOOD LANE

(Street)

(State)

(Month/Day/Year)

POTSDAM, NY 13673

2. Issuer Name and Ticker or Trading

Symbol

INC [CBU]

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities

Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Instr. 8)

(Month/Day/Year) (Instr. 3, 4 and 5)

(A)

or Code V Amount (D) Price

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)

1. Title of Derivative Security Conversion (Instr. 3) or Exercise

3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if any

4. 5. Number of TransactionDerivative

Securities Code

6. Date Exercisable and

Underlying Securit (Instr. 3 and 4)

**OMB APPROVAL** 

OMB 3235-0287 Number:

2005 Estimated average burden hours per

response...

Expires:

January 31,

0.5

10% Owner

Other (specify

1. Name and Address of Reporting Person \*

(Zip)

2. Transaction Date 2A. Deemed

**COMMUNITY BANK SYSTEM** 

3. Date of Earliest Transaction

(Month/Day/Year) 12/19/2012

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

below)

X\_ Director

Officer (give title

Issuer

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

5. Relationship of Reporting Person(s) to

(Check all applicable)

Person

Securities

Following

Reported

Transaction(s)

(Instr. 3 and 4)

Owned

5. Amount of 6. Ownership 7. Nature of Form: Direct Indirect Beneficially (D) or Indirect Beneficial

> Ownership (I) (Instr. 4) (Instr. 4)

SEC 1474 (9-02)

**Expiration Date** (Month/Day/Year) 7. Title and Amoun

#### Edgar Filing: Mucenski Edward S. - Form 4

	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo Num Shar
Phantom Stock (Deferred Compensation)	(1)	12/19/2012		A		228.2688		<u>(1)</u>	<u>(1)</u>	Common Stock	228

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1 8	Director	10% Owner	Officer	Other				
Mucenski Edward S.								
10 RIDGEWOOD LANE	X							
POTSDAM, NY 13673								

# **Signatures**

/s/ Danielle M. Cima, pursuant to a Confirming Statement executed by Edward S. Mucenski

12/20/2012

\*\*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).

Each unit of phantom stock is the economic equivalent of one share of Community Bank System, Inc. common stock. The units of (1) phantom stock relating to the Deferred Compensation Plan will be settled in Community Bank System, Inc. common stock at future dates selected by the reporting person.

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.

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