Edgar Filing: Bencel Lisa F - Form 4

| Bencel Lisa F | 7 | | | | | | | | | | | | |
|------------------------------------|---|------------------------|--------------|--------------------------------|--------------------|--------------------|-----------|--------------|--|--------------------------------------|-----------------------|--|--|
| Form 4 | | | | | | | | | | | | | |
| May 30, 2018 | 3 | | | | | | | | | | | | |
| FORM | Δ ΄ | | | | | | | | | OMB AI | PPROVAL | | |
| | UNITEDS | STATES S | | | | ND EXC D.C. 205 | | IGE (| COMMISSION | OMB Number: | 3235-0287 | | |
| Check this | | | | | | | | | | Expires: | January 31, | | |
| subject to STATEMENT OF CHA | | | | NGES IN BENEFICIAL OW | | | | | NERSHIP OF | Estimated a | 2005 average | | |
| Section 16. | | | | | Rľ | TIES | | | | burden hours per | | | |
| Form 4 or Form 5 | | ~ | | | | ~ | - | | response | | | | |
| obligation | · · | | | | | | | U U | e Act of 1934, | | | | |
| may conti | nue. Section 17(a | | | • | | . | | | f 1935 or Section | n | | | |
| See Instru 1(b). | ction | 30(n) 0 | i the inv | vestmen | ιC | Company | Act | 01 192 | ŧU | | | | |
| (Print or Type R | esponses) | | | | | | | | | | | | |
| Bencel Lisa F Symbo | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | | TRONI | CS | S INC /D | E/ [S | VT] | (Check all applicable) | | | | |
| (Last) | (Last) (First) (Middle) 3. Date of Earlie | | | | rliest Transaction | | | | | | | | |
| | | | | onth/Day/Year) | | | | | Director | e title Owner Other (specify | | | |
| 300 MAPL | E STREET, P.O. | BOX (|)5/25/2(|)18 | | | | | X Officer (give below) Chief I | below) Financial Offic | | | |
| | (Street) | 4 | 1. If Amer | ndment, D | Date | e Original | | | 6. Individual or Jo | oint/Group Filir | ng(Check | | |
| | | | | ed(Month/Day/Year) | | | | | Applicable Line) | | | | |
| ELMA, NY | 14059 | | | | | | | | _X_ Form filed by C Form filed by M Person | One Reporting Pe Iore than One Re | | | |
| (City) | (State) (| Zip) | T .11 | TNL | D | | • | • • • • | · · · D' · · · · · · · · · · · | | | | |
| | | - | | | | | | | uired, Disposed of | | - | | |
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deeme Execution | | | | | | - | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect | | |
| (Instr. 3) | (Wonth/Day/Tear) | any | Date, II | Code (D) | | | | 01 | | (D) or | Beneficial | | |
| | | (Month/Da | ay/Year) | (Instr. 8) (Instr. 3, 4 and 5) | | | Owned | Indirect (I) | Ownership | | | | |
| | | | | | | | | | Following Reported | (Instr. 4) | (Instr. 4) | | |
| | | | | | | | (A) | | Transaction(s) | | | | |
| | | | | Code | v | Amount | or (D) | Price | (Instr. 3 and 4) | | | | |
| Common | 05/05/0010 | | | | | | | | 12 000 (2) | D | | | |
| Stock | 05/25/2018 | | | А | | 12,000 | А | <u>(1)</u> | 12,000 (2) | 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)

Edgar Filing: Bencel Lisa F - Form 4

| 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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|-------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Bencel Lisa F 1110 MAPLE STREET, P.O. BOX 300 ELMA, NY 14059 | | | Chief Financial Officer | | | | | |
| Signatures | | | | | | | | |
| Michael C. Donlon, attorney in fact for L Bencel | isa | 05/30 |)/2018 | | | | | |
| <u>**</u> Signature of Reporting Person | | Da | ate | | | | | |
| Explanation of Respond | -902 | | | | | | | |

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) Award of restricted shares pursuant to the Company's 2012 Long-Term Incentive Plan. These restricted shares vest one-third each on January 1, 2019, 2020 and 2021.
- (2) As of the date hereof, the Reporting Person's direct beneficial ownership includes 12,000 restricted shares granted under the Company's 2012 Long-Term Incentive Plan that have not yet vested.

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.