Edgar Filing: O'Conor Raymond F - Form 4

O'Conor Ray	mond F											
Form 4												
January 16, 2	2018											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
UNITED STATES SECURITIES AND EACHANGE COMMISSION							OMB	3235-0287				
Check thi	s box		Was	shington,	D.C. 20	549			Number:			
if no longer						TOTA			Expires:	January 31, 2005		
subject to	SIAIR	EMENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP OF				Estimated average				
Section 16.			SECURITIES					burden hours per				
Form 4 or Form 5			Castian 1	(a) = f + b	. C	i na D		- A -t -f 1024	response	0.5		
obligation	10						U	e Act of 1934,	n			
may conti	inue. Section 1			vestment	-			1935 or Section	1			
See Instru 1(b).	iction	50(II)		vestment	Compai	ly AC	101194	-0				
1(0).												
(Print or Type R	Responses)											
	ddress of Reportir	ng Person [*]	2. Issuer	Issue				•	5. Relationship of Reporting Person(s) to			
O'Conor Ray	ymond F		Symbol					Issuer				
ARROV [AROW				W FINANCIAL CORP W]				(Check all applicable)				
								(check an applicatio)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			X Director		Owner		
(Month/D			Day/Year)				Officer (give title Other (specify below)					
7 ROLLING	GREEN DRI	VE	01/16/2	018				below)	below)			
			ndment, Date Original			6. Individual or Joint/Group Filing(Check						
			onth/Day/Year)				Applicable Line)					
								_X_Form filed by C	One Reporting Per fore than One Re			
WILTON, N	VY 12831							Person		porting		
(City)	(State)	(Zip)	Tahl	e I - Non-D	erivative	Secur	ities Aca	uired, Disposed of	or Beneficial	v Owned		
1.Title of	2. Transaction D	ata 24 Daa					-	· -		•		
Security	(Month/Day/Yea		on Date, if	3. Transactio	4. Securi on(A) or D			5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	(any			(Instr. 3,	-				Beneficial		
		(Month/	Day/Year) (Instr. 8)					Owned	Indirect (I)	Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common						D	\$					
Stock	01/16/2018			S	500	(1)	ф 34.35	49,327 <u>(2)</u>	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)

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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting o when runne / runne os	Director	10% Owner	Officer	Other			
O'Conor Raymond F 7 ROLLING GREEN DRIVE WILTON, NY 12831	Х						
Signatures							
Thomas J. Murphy, Attorney		01/16/2019	2				

in Fact

01/16/2018

Date

**Signature of Reporting Person

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).
- Open market sale pursuant to a 10B5-1 Plan which was established by Reporting Person on November 1, 2017 in accordance with Rule (1) 10B5-1 of the Securities Exchange Act of 1934, as amended.
- The information provided reflects 13 shares acquired under the Company's DRIP since December 15, 2017 which were not required to be (2) reported on a Form 4. This information is being furnished to disclose the total holdings of the insider as of the date of this Form 4.

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.