

FIRST OF LONG ISLAND CORP
 Form 4
 January 23, 2017

FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
TEAGLE WALTER C III

2. Issuer Name and Ticker or Trading Symbol
FIRST OF LONG ISLAND CORP [FLIC]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction
 (Month/Day/Year)

____ Director _____ 10% Owner
 ____ Officer (give title below) ____ Other (specify below)

THE FIRST NATIONAL BANK OF LONG ISLAND, 10 GLEN HEAD RD

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

GLEN HEAD, NY 11545

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)	
			Code	V	Amount	(A) or (D)				Price
Common Stock	01/19/2017		M		1,095	A	\$ 0	123,821	D	
Common Stock								6,099	I	By Son
Common Stock								6,099	I	By Son
Common Stock								6,099	I	By Daughter
								1,517	I	By Spouse

Common
Stock

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

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(9-02)**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities (A) or Disposed of (D) (Instr. 3, 4, and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					V	(A)	(D)	Date Exercisable	Expiration Date		Title
Restricted Stock Unit	Ⓐ	01/19/2017		M		1,095		Ⓐ	Ⓐ	Common Stock	1,095 (3)
Stock Option	\$ 12.898							01/24/2016	01/24/2021	Common Stock	6,651 (3)
Stock Option	\$ 11.142							01/18/2015	01/18/2020	Common Stock	5,889 (3)
Stock Option	\$ 9.9647							01/19/2014	01/19/2019	Common Stock	7,691 (3)
Stock Option	\$ 8.222							01/21/2013	01/21/2018	Common Stock	8,901 (3)

Reporting Owners**Reporting Owner Name / Address****Relationships**

Director 10% Owner Officer Other

TEAGLE WALTER C III
THE FIRST NATIONAL BANK OF LONG ISLAND
10 GLEN HEAD RD
GLEN HEAD, NY 11545

Signatures

/s/William Aprigliano POA Walter C.
Teagle III

01/23/2017

__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).

- (1) No exercise price for this type of award
- (2) The restricted stock units vest in three equal annual installments beginning January 19, 2017.
- (3) Adjusted to reflect stock split.

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.