## Edgar Filing: Northfield Bancorp, Inc. - Form 4

Northfield B	Bancorp, Inc.									
Form 4										
August 25, 2	2016									
FORM	<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL		
							OMMISSION	OMB	3235-0287	
Check th	uis box		Washin	gton, D.O	C. 20549			Number:		
if no lon	der.							Expires:	January 31, 2005	
subject t	o SIAIEN	AENT OF C		GES IN BENEFICIAL OWNERSHIP O				Estimated average		
Section							burden hours per			
Form 4 o Form 5		concept to Sac	16(a)	of the Se	annitiaa	Frehence	$\Lambda$ at af 1024	response	0.5	
obligatio	<b>.</b>					•	Act of 1934, 1935 or Section			
may con	tinue.		the Invest	•	-	•		L		
See Instr 1(b).	ruction	50(11) 01	the myest				)			
1(0).										
(Print or Type	Responses)									
1. Name and Address of Reporting Person _2. IssueScura Patrick E JrSymbol			2. Issuer Nan				5. Relationship of Reporting Person(s) to			
			•	ibol				Issuer		
		Ν	orthfield E	Bancorp,	Inc. [NF	BK]	(Check	all applicable	;)	
(Last)	(First) (I	Middle) 3.	Date of Earl	iest Transa	ction		(0.000	an approact	,	
			-	th/Day/Year)			XDirector10% Owner			
581 MAIN	STREET	08	8/25/2016			-	Officer (give t below)	itle Othe below)	er (specify	
			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				-			Applicable Line)			
				.j /			_X_ Form filed by O			
WOODBR	IDGE, NJ 07095					-	Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)								
(City)		-	Table I - I	Non-Deriv	ative Secu	urities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date		3.			Acquired (A)		6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year) Execution Date,			, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)			Securities Beneficially	Ownership Form:	Indirect Beneficial	
(Instr. 5)		any (Month/Day/			u. <i>J</i> , <del>4</del> and	1.5)	Owned	Direct (D)	Ownership	
		· · · ·		,			Following	or Indirect	(Instr. 4)	
					(A)		Reported	(I) (I)		
					or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
~			Cod	e V Am	ount (D)		(instr. 5 and 1)			
Common	08/25/2016		S	2,5	00 D	\$	81,846	D		
Stock				,		15.8809				

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 7.09					01/30/2010	01/30/2019	Common Stock	97,220	
Stock Options	\$ 13.13					06/11/2015	06/11/2024	Common Stock	75,000	
Stock Options	\$ 14.76					05/27/2016	05/27/2025	Common Stock	32,000	

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Scura Patrick E Jr 581 MAIN STREET WOODBRIDGE, NJ 07095	Х						
Signatures							
Steven M. Klein, pursuant to P Attorney	ower of		08/25/20	016			
**Signature of Reporting Pers	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).

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.