## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	nd Address of Emanuel	Reporting Person*					me <b>and</b> Tick E BANC				]			k all app Dired	olicable) ctor	g Person(s) to I	Owner
(Last) PO BOX	(Fii	rst) (	Middle)		08/15	3. Date of Earliest Transaction (Month/Day/Year) 08/15/2018							Officer (give title below)		Other (specify below)		
(Street) BRIDGEHAMPTON NY 11932			4. If A	mendr	ment, Date o	f Origina	ıl Filed	d (Month/Da	ıy/Year	)	6. Indi Line) X	Forn	n filed by One n filed by Mor	Filing (Check A Reporting Pers e than One Rep	son		
(City)	(St	ate) (	Zip)											1-613			
		Tabl	e I - No	n-Deriv	ative S	Secu	rities Acc	uired	, Dis	posed o	f, or l	Bene	ficially	Own	ed		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		) or 4 and 5)	Secur Benef Owne	mount of urities eficially ied Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
					Code	v	Amount	(A) (D)	or P	rice	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common				08/15/	2018			S		2,200	]	)	\$35	55,	885.044	D	
Common				08/15/	2018			S		100	]	) \$	35.025	55,	785.044	D	
Common				08/15/	2018			S		1,100	]	) ;	\$35.05	54,	685.044	D	
Common		08/15/	08/15/2018			S		100	100 D \$		\$35.1	54,585.044		D			
Common	Common		08/15/	/15/2018					200 D		)	\$35.2 54		,385.044 D			
Common				08/15/	2018			S		300	]	) ;	\$35.25	54,	085.044	D	
Common				08/15/	2018			S		14	]	) ;	\$35.35	54,	071.044	D	
Common															5,000	I	By Trust 1
Common												5,000		I	By Trust 2		
		Та					ies Acqui arrants,							wned			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	if any	ution Date, Tran		saction of		6. Date Exercisable and Expiration Date (Month/Day/Year)		e			Der Sed (Ins	rice of ivative curity tr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V	,	(A) (D)	Date Exercisa		Expiration Date	Title	Amou or Numl of Share	er				

**Explanation of Responses:** 

/s/ Emanuel Arturi

08/16/2018

\*\* Signature of Reporting Person

Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).