FORM 4		ES SECURITIES AND E WASHINGTON, D. C. 2		OMB Number	OMB APPROVAL IB Number 3235-0287 xpires: December 31, 2001		
	STATEMENT	OF CHANGES IN BENE	FICIAL OWNERSHIP	Estimated avera hours per respo	ige burden		
CHECK THIS BO LONGER SUBJEC SECTION 16. I FORM 5 OBLIGA CONTINUE. SEE Instruction 1	T TO FORM 4 OR TIONS MAY	Section 17(a) of		Securities Exchange Act olding Company Act of 1 Company Act of 1940			
(Print or Type Re	esponses)						
1. Name and Add	ress of Repo	rting Person* 2	. Issuer Name AND Tick Symbol	ker or Trading 6.	Relationship of Rep Person(s) to Issuer (Check all applica		
FEHRENBACH	FRED	Ρ.	DIME COMMUNITY BANCS	SHARES, INC. ("DCOM")	X Director Officer (give title below)	10% Owner Other (specify below)	
	(First)	(Middle) 3	. IRS or Social Security Number of	4. Statement for Month/Year MAY, 2000	DETOM)		
209 HAVEMEYER S			Reporting Person (Voluntary)		Tadician I an Isia		
BROOKLYN	(Street) NY (State)	11211 (Zip)		5. If Amendment, 7 Date of Original (Month/Year)	'. Individual or Join (Check Applic X Form filed by O Form filed by M Reporting Pers	cable Line) Dne Reporting Person More than One	
				TABLE I NON-DERIVATIV OR BENEFICIAL		ED, DISPOSED OF,	
1. Title of Secu Instr. 3)	urity	2. Trans- action Date (Month/ Day/ Year)	Code or Di (Inst. 8) of (I	ired (A) Sec isposed Ben D) Own tr. 3,4 of	ount of 6. Owners curities Form: leficially Direct led at End or Ind Month (I) cr. 3 and 4) (Instr	Indirect (D) Beneficial lirect Ownership (Instr. 4)	
		i cui j	Code V Amount	(A) or Price (D)			
COMMON STOCK		5/02/2000	D 1,000	D \$17.125		D I RRP Trust (6,348) Other (9,622)	
Reminder: Renor	t on a senar:	ate line for each c	lass of securities her	neficially			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. (0ver) * If the form is filed by more than one reporting person, see Instruction 4(b)(v). (0ver) SEC 1474 (7-96)							
FORM 4 (CONTINUE	J)						
			SPOSED OF, OR BENEFICI ons, convertible secu				
of Deriv- sion ative Secu- Exer rity of I (Instr. 3) riva	n or action rcise Date	Code ativ h/ (Instr. riti 8) quir) or D pose	eriv- ercisable a e Secu- and Ex- of es Ac- piration I ed (A) Date n is- (Month/ of d of Day/ Instr. Year)	Title 8.Price of and Amount Derivativ of Under- Security lying Secu- (Instr. 5 rities (Instr. 3 and 4)	ve derivative s Securities F 5) Beneficially o Owned at End D of Month v (Instr. 4) S D (I	Owner- 11.Nature of ship Indirect Form Benefi- of cial Deri- Owner- vative ship Secu- (Instr.4) Direct (D) or Indirect (I)	
NO TRANSACTIONS	IN CURRENT PI	ERIOD.			39,675	I Stock Option	
		Code V (A)	(D) Date Expira-1 Exer- tion cisable Date	Title Amount or Number of Shares		Plan	

cisable Date

Shares

**Intentional misstatements								
or	omiss	ions (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 provided 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. /s/FRED P. FEHRENBACH Augu **Signature of Reporting Date Person

August 9, 2000 Date

By: Fred P. Fehrenbach

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