FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT OF CHAN | IGES IN BENEFICIAL | OWNERSHIP |
|-------------------|--------------------|------------------|

| l | OMB APPRO | OVAL | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | |
| l | Estimated average burden | | | | | | | |
| l | hours per response: | 0.5 | | | | | | |

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

| 1. Name and Address of Reporting Person* Perez Michael A | | | | | DI | 2. Issuer Name and Ticker or Trading Symbol DIME COMMUNITY BANCSHARES INC [DCOM] | | | | | | | | | 5. Relationship of Reporti (Check all applicable) Director Officer (give title | | | ng Pe | 10% C | |
|--|--|-------------|----------------|---------------------|---|--|--------|-----------------------------|------------------------------------|-----------|--|---|-------------|------------------------------------|---|--|---|-------------------|--|--|
| (Last) (First) (Middle) 300 CADMAN PLAZA WEST 8TH FLOOR | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/05/2020 | | | | | | | | | X | X Officer (give title Officer Specify below) EVP & Chief Retail Officer | | | | | |
| (Street) BROOKI | | Y State) | 11201 (Zip) | | _ 4. If | f Ame | endmen | t, Date o | of Origina | I Filed | (Month/Da | ay/Yea | ır) | | ine) X | Form | r Joint/Grou n filed by On n filed by Mo on | e Re _l | porting Pers | on |
| | | Tak | le I - No | n-Deriv | ative | Se | curiti | es Ac | quired, | Dis | posed o | f, or | Bene | efici | ally | Owne | ed | | | |
| Date | | | | action Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Securiti Benefic Owned | | ies :ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (1 | A) or D) | Price | . | | ed ction(s) and 4) | | | (Instr. 4) |
| Preferred Stock, Series A 02/05 | | | | 5/2020 | 2020 | | P | | 400 | | Α | \$2 | 525 4 | | 400(1) | | D | | | |
| Common Stock | | | | | | | | | | | | | | 299 | | | D | | | |
| Common Stock | | | | | | | | | | | | | | | 4,857 | | ,857 | | | Restricted Stock Awards |
| | 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 1. Title of Conversion or Exercise (Month/Day/Year) 2. Canada 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 4. Canada 4. Canada 5. Canada 6. Cana | | | | n Date, | | ransaction of Deriv () Secu (A) on Dispo | | or osed o) r. 3, 4 | 6. Date E Expiratio (Month/E | n Dat | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | Deriv Secu | . Price of erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | , | 10. 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 | of Sha | res | | | | | | | | | |

Explanation of Responses:

1. Represents shares of Dime Community Bancshares, Inc. 5.50% Fixed-Rate Non-Cumulative Perpetual Preferred Stock, Series A ("Series A Preferred Stock"). The Series A Preferred Stock is not convertible into Dime Community Bancshares, Inc. common stock.

Remarks:

Leslie Veluswamy, as attorney in fact for PEREZ MICHAEL

02/06/2020

Date

<u>A</u>

** Signature of Reporting Person

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

- * 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.

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.