FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|----------------|------|-------|
| vaoriirigiori, | D.O. | 20010 |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| 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* Phillips Daniel R | | | | | | 2. Issuer Name and Ticker or Trading Symbol Pathfinder Bancorp, Inc. [PBHC] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | |
|--|---|--|---|-------|----------|--|-----|----------------|------------|---------------------------------|------|------------------------------|--|-----------|--|---|-------------------------|---------------|--|--|--|--|
| (Last) 214 WES | (Fi ST FIRST S | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/07/2022 | | | | | | | | | | X Officer (give fille Officer (specify below) Senior Vice President | | | | | | |
| (Street) OSWEG | O N | Y 1 | 13126 | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Appl Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| (City) | (St | | Zip) | | | the Counties Assumed Bissess to Co. 7 | | | | | | | | | | Person | | | | | | |
| 1 Title of 9 | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature | | | | | | | | | | | | | | | | | | | | | |
| Date | | | | Date | | Execution (a) Ex | | xecution Date, | | Transaction Code (Instr. | | Disposed Of (D) (Instr. 3, 4 | | | | Securiti Benefic Owned | es ally Following | Form (D) o | n: Direct r Indirect str. 4) | of Indirect Beneficial Ownership | | |
| | | | | | | | | | | Code | v | Amount | (A (C |) or) | Price | Reporte Transac (Instr. 3 | tion(s) | | | Instr. 4) | | |
| Common Stock | | | | 06/07 | 7/2022 | /2022 | | | | M | | 4,000 |) | A | \$10.8 | 1 12 | ,272 | D | | | | |
| Common Stock | | | | | | | | | | | | | | | 11 | ,510 | | | By ESOP | | | |
| Common Stock | | | | | | | | | | | | | | | 6,021 | | | | 3y 401(k) | | | |
| | 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. Deeme Execution if any (Month/Da | Date, | Code (In | | | | Ex | Date Exc piration onth/Da | Date | | 7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4) | | s security | 8. Price of Derivative Security (Instr. 5) | | Filly C | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Dat Exc | ite ercisabl | | cpiration ate | Title | 1 | Amount or Number of Shares | | | | | | | |
| Stock Options | \$10.81 | 06/07/2022 | | | M | | | 4,000 | 04 | 1/01/201 | 7 0 | 4/01/2026 | Comm | | 4,000 | \$10.81 | 16,237 | , | D | | | |
| Stock Options | \$11.35 | | | | | | | | 05 | 5/06/201 | 7 0 | 5/06/2026 | Comm | | 15,816 | | 15,816 | 5 | D | | | |

Explanation of Responses:

Remarks:

/s/ James A. Dowd as POA for Daniel R. Phillips

06/09/2022

** 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.

 $^{^{\}star}$ 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).