FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
OMB Number:	3235-0104							
Estimated average burden								
hours per response:	0.5							

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* Moran John V 2. Date of Event Requiring Statement (Month/Day/Year) 11/12/2019				nent	3. Issuer Name and Ticker or Trading Symbol NBT BANCORP INC [NBTB]							
(Last) 52 SOUTH B	(First) (Middle) ROAD STREET			Relationship of Reporting Person (Check all applicable) Director		n(s) to Issuer 10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Street)		13815			X Officer (give title below) EVP & Chief Finan		Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
(City)	(State)	(Zip)								Form filed b Reporting P	y More than One erson	
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						int of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
NBT Bancorp Inc. Common Stock						2,500	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securi		ity (Instr. 4) Conv		ersion	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	•	Amount or Number of Shares	Price of Deriva Securi	tive	or Indirect (I) (Instr. 5)		

Explanation of Responses:

John V Moran

11/18/2019

** 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 5 (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).