## FORM 4

## **UNITED STATES SE**

Washington, D.C. 20549

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OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

	Check this box if no longer subject to
a	Section 16. Form 4 or Form 5
	obligations may continue. See
	Instruction 1(h)

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

intende defens	ed to satisfy the e conditions of struction 10.																		
1. Name and Address of Reporting Person*  Rowley Richard B				2. Issuer Name and Ticker or Trading Symbol Orange County Bancorp, Inc. /DE/ [ OBT ]										ck all appli	icable)	ıg Per	son(s) to Iss		
(Last) 212 DOI	(Fi	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025										Officer below)	er (give title v)		Other (s below)	pecify
(Street) MIDDLI (City)	ETOWN N		10940 Zip)		4. If A	Amend	dment	, Date o	of Origina	Filed	I (Month/D	ay/Year)		6. Inc Line)	Form	filed by One	e Rep	g (Check Ap orting Perso n One Repo	n
		Tabl	e I - Non-C	Derivat	tive S	Secu	ıritie	s Ac	quired,	Dis	posed o	of, or Be	enefi	cially	/ Owne	d			
1. Title of	Security (Inst	tr. 3)	Da	. Transact ate Month/Day		Exe if ar	A. Deemed Execution Date, f any Month/Day/Year)		Transaction Dis Code (Instr. 5)		Dispose	curities Acquired (A osed Of (D) (Instr. 3,		4 and Securit Benefic Owned Reporte		es Fo ially (D Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) o (D)	r Pri	ce	Transact	Transaction(s) (Instr. 3 and 4)			(
Common	Stock														269,13	35(1)(2)(3)		D	
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. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr 8)				6. Date Ex Expiration (Month/Da	Date		and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	ode \	,	(A)		Date Exercisab		xpiration ate	Title	Amo or Num of Shar	ber					
Phantom Stock	(4)	01/02/2025			A		405		(4)	T	(4)	Common Stock	40	5	\$53.98	8,542		D	

## **Explanation of Responses:**

- 1. Includes restricted stock units which vest 100% as of the date of grant and are settled in shares of Issuer common stock upon separation from service of the reporting person.
- 2. Includes restricted stock units which vested 100% on August 8, 2024 and are settled in shares of Issuer common stock upon separation from service of the reporting person.
- 3. Includes restricted stock units which vest 100% on March 21, 2025 and are settled in shares of Issuer common stock upon separation from service of the reporting person.
- 4. Each share of phantom stock is the economic equivalent of one share of common stock and becomes payable upon the reporting person's separation of service as a director.

/s/ Jennifer Staub, pursuant to power of attorney

01/03/2025

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.