FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*  HOLCOMBE GREGORY F	2. Date of Event Requiring Statement (Month/Day/Year) 08/04/2021		3. Issuer Name and Ticker or Trading Symbol Orange County Bancorp, Inc. /DE/ [ OBT ]					
(Last) (First) (Middle) 212 DOLSON AVENUE			Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) MIDDLETOWN NY 10940			X Director Officer (give title below)	10% Owner Other (specify below)		(Ch	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr. )	Form: [ (D) or li			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock			19,915	I	D			
Common Stock			34,720	I		By LLC		
Common Stock			16,309	]	I P		By Trust	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)  2. Date Exerc Expiration Date (Month/Day/V		ate	3. Title and Amount of S Underlying Derivative So (Instr. 4)		curity Convers		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price o Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

/s/ Benjamin Azoff, pursuant to Power of

Attorney

\*\* Signature of Reporting

Date

08/04/2021

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 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).

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.