FORM 4

UNITED S

Washington, D.C. 20549

STATES SECURITIES AND EXCHANGE COMMISSI

	Check this box if no longer subject to
1	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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL												
	OMB Number:	3235-0287											
l	Estimated average burden												
l	hours per response:	0.5											

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 intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

1. Name and Address of Reporting Person* HOLCOMBE GREGORY F						2. Issuer Name and Ticker or Trading Symbol Orange County Bancorp, Inc. /DE/ [OBT]								Relationship neck all appli Direct	cable)	rting Person(s) to		Ssuer
(Last) (First) (Middle) 212 DOLSON AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 09/16/2024								Officer (give title Other (specify below) below)				
(Street) MIDDLETOWN NY 10940				4. li	f Amen	ndment	t, Date	of Origina	al File	ed (Month/E	Lin	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si	,	(Zip)	Davis		0		4-	!			-f D-						
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day)				ction	on 2A. Deemed Execution Date,			3. 4. Securit			es Acquire Of (D) (Inst	d (A) or	5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		. Nature of ndirect Beneficial Ownership nstr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transactio (Instr. 3 an				mstr. 4)
Common Stock													34,980 ⁽¹⁾⁽²⁾⁽³⁾ D		D			
Common Stock													7,460 I			By Foundation		
Common Stock														34,720		I		By LLC
Common Stock														6,027		I		By Trust
		Т	able II								posed of convert			y Owned				
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/Yea		4. Transa Code (8)				6. Date E Expiratio (Month/D	n Dat	Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Phantom Stock	(4)	09/16/2024			A		\$30		(4)		(4)	Common Stock	30	\$59.43 7,		740	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 ** Signature of Reporting Person

09/18/2024

Date

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.