SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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).	

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

					er Name and Ticke <u>ge County Ba</u>		ymbol I <u>c. /DE/</u> [OBT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
								1	Director	10% 0	Owner		
(Last)	(First)	(Middle)		3. Date 07/01/	of Earliest Transac 2024	tion (Month/E)ay/Year)		Officer (give title below)	Other below	(specify)		
212 DOLSON AVENUE					nendment, Date of	Original Filed	(Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)								1	Form filed by On	e Reporting Per	son		
(Street) MIDDLETOWN NY 10940									Form filed by Mo Person	re than One Rep	oorting		
(City)	(State)	(Zip)		Rule	: 10b5-1(c) ⊺	Transacti	on Indication						
Check this box to indicate that a transaction was satisfy the affirmative defense conditions of Rule										n plan that is inten	ded to		
	Ta	able I - Nor	n-Deriva	tive S	ecurities Acqu	uired, Disp	oosed of, or Benefi	cially	Owned				
1. Title of Security (I	nstr. 3)		2. Transac Date (Month/Da		2A. Deemed Execution Date, if any	3. Transaction Code (Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)	4 and	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial		

	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transa Code (8)					Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock								1,301(1)(2)(4)	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. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock	(3)	07/01/2024		Α		\$395		(3)	(3)	Common Stock	395	\$47.51	2,863	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 vest 100% on August 8, 2024 and are settled in shares of Issuer common stock upon separation from service of the reporting person.

3. 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.

4. 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.

/s/ Jennifer Staub, pursuant to 07/03/2024 power of attorney

** Signature of Reporting Person 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.