FORM 4

UNITED STATES SE

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

CURITIES AND EXCHANGE COMMISSI	ON
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OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

hours per response:

Check this box if no longer subject to
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

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* Gilfeather Michael J					2. Issuer Name and Ticker or Trading Symbol Orange County Bancorp, Inc. /DE/ [OBT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Officati	HCI WHCH	act 5												v	✓ Director			10% Owner			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								,	Officer (give title below)			Other (s below)	specify		
212 DOLSON AVENUE						11/01/2024									President and CEO						
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
MIDDLI	ETOWN N	Y	10940		_										Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(City) (State) (Zip)										Person										
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	es Ac	quired	, Dis	sposed (of, or B	enefi	ciall	y Owned	d					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution D			Code (Inst				4 and Securiti Benefic Owned		s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) o (D)	Pri	се	Transact	Reported Transaction(s) (Instr. 3 and 4)			(msu. 4)		
Common Stock 11/01.					/2024	2024					400	A \$5		5.67	7 43,295(1)(2)(3)(4)			D			
Common Stock 11/01/2				/2024	2024			P		125	A	\$5	\$55.67		7,925		I	By IRA			
		Т	able II -								oosed of converti				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code (8)		on of		6. Date E Expiratio (Month/D	n Dat		7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber							
Phantom	(5)								(5)		(5)	Common	8 1	20		8 120		D			

Explanation of Responses:

- 1. Includes restricted stock units which vest at a rate of 1/3 per year commencing on February 15, 2023.
- 2. Includes restricted stock units which vest at a rate of 1/3 per year commencing on March 11, 2024.
- 3. Includes restricted stock units which vest on December 31, 2026.
- 4. Includes restricted stock units which vest at a rate of 1/3 per year commencing on March 21, 2025.
- 5. 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

11/04/2024 Date

** Signature of Reporting Person

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.