FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Vashington,	D.C.	20549

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to 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

1. Name and Address of Reporting Person* <u>Keane Kevin J</u>					Or	2. Issuer Name and Ticker or Trading Symbol Orange County Bancorp, Inc. /DE/ [ OBT ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2024								Officer (give title Other (specify below) below)						
212 DOI	LSON AVE	NUE			4. It	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	ETON N	Y	10940											X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	(S	itate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication														
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nded to										
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3)					Form: Direct		7. Nature of Indirect Beneficial Ownership						
									Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Common Stock													9,650(1)(2)		]	D			
Common	Common Stock												3,700		I		By Partnership			
Common Stock												416			I	By 401(k)				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Conversion Date Execution Date Execution Date, or Exercise (Month/Day/Year)			4. Transa	ransaction of Of Sec Acc (A) Dis of (Instr.		5. Number 6. D		6. Date Exercisable and Expiration Date (Month/Day/Year)			nd of s ng e Security nd 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership oct (Instr. 4)				
					Code	Code V (A) (D)		Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares								
Phantom Stock	(3)	03/15/2024			A	\$19		(3)		(3)	Common Stock	19	\$47.1	3,970		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.

/s/ Jennifer Staub, pursuant to power of attorney

03/18/2024

\*\* 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.