FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	Washington,	D.C.	20549
------------------------	-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL

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

**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

1. Name and Address of Reporting Person*						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)					
Heimbach Louis						Stange County Dancorp, mer / DEF [ OB1 ]									_   2	X Director			10% Ov	vner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 10/02/2023										Officer below)	(give title		Other (s below)	pecify	
212 DOLSON AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																X Form filed by One Reporting Person					
MIDDLETOWN NY 10940						Form filed by More than One Reporting Person												rting			
(City) (State) (Zip)						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.															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution Date,			, Transaction Dispose Code (Instr. 5)			rities Acquired (A) o ed Of (D) (Instr. 3, 4 a			Benefici Owned I	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	ie V		Amount	unt (A) or		Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common										57,340(1)(3)			D								
Common	Common Stock													By IRA							
	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. Deeme Execution if any (Month/Day	Date,	4. Transa Code (1 8)				6. Date Exercisal Expiration Date (Month/Day/Year			Amount of			8. Price of Derivative Security (Instr. 5)			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Ex Da	epiration ate	Title	0 N 0	lumber						
Phantom Stock	(2)	10/02/2023			A		\$422		(2)			(2)	Commo		422	\$42.5	\$1,726	6	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. 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.
- 3. Includes restricted stock units which vest 100% on August 8, 2024 and are settle in shares of Issuer common stock upon separation from service of the reporting person.

/s/ Jennifer Staub, pursuant to 10/03/2023 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.