FORM 4

UNITED ST

Washington, D.C. 20549

OMB APP	ROVAL
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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).

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).

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

See ins	struction 10.																					
1. Name and Address of Reporting Person* Rouis Jonathan F					2. Issuer Name and Ticker or Trading Symbol Orange County Bancorp, Inc. /DE/ [OBT]										(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 212 DOLSON AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 09/16/2024											er (give title w)	Other (s	· I			
(Street) MIDDLI (City)	ETOWN N		10940 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tabl	le I - Nor	n-Deriva	ative	Sec	uritie	es Ac	qu	ıired,	Dis	posed o	of, or	Ben	eficial	ly Own	ed					
1. Title of Security (Instr. 3)				2. Transa Date (Month/D	ar) E	2A. Deemed Execution Date, if any (Month/Day/Year			3. Transa Code (8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				Secur Benef Owner	cially I Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount		A) or D)	Price		ted action(s) 3 and 4)			(Instr. 4)		
Common	Stock															5,1	51(1)(2)(3)		D			
Common	Stock																200		I By Spouse			
		Т	able II -	Derivat (e.g., p												/ Owne	t					
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, Transact Code (In					6. Date Exercisa Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Da Ex	te ercisab		xpiration ate	Title	O N O	umber							
Phantom Stock	(4)	09/16/2024			Α		\$6			(4)		(4)	Comn		6	\$59.43	1,432	2	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

09/18/2024

** 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.