FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-	

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	OMB Number:	3235-0287
	Estimated average	burden
	houre 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).

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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Okun Philip A				Hanover Bancorp, Inc. /NY [HNVR]								V	Direc	,	1)% Ov	vner		
(Last) (First) (Middle) C/O HANOVER BANCORP, INC. 80 EAST JERICHO TURNPIKE					3. Date of Earliest Transaction (Month/Day/Year) 08/20/2024									Officer (give title Other (s below) below)					pecify
(Street) MINEOLA NY 11501					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting					on	
(City)	(St	ate) (2	Zip)												Perso	on		·	
		Table	I - No	n-Deriva	tive \$	Secu	rities	s Acq	uired,	Dis	posed of	, or E	Bene	ficially	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution D			Date,	Code (Instr.					, 4 and Secur Bene		cially Following	Form: Direct		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Pr		rice	Transa	ction(s) 3 and 4)			(msu. 4)
Common Stock 08/20/2					2024		P		100	A	. \$	517.14	39,746		D				
		Та									osed of, convertib				Owne	d	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution D		on Date, Transac				6. Date Exercisabl Expiration Date (Month/Day/Year)		te Amount of		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficia Ownershi t (Instr. 4)	
					Code	de V (A) (D)				Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

08/20/2024 /s/ Gregory Krauss, POA

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).