Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

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* Golden Robert					Hanover Bancorp, Inc. /NY [HNVR]								(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	(Fii	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/31/2024									Office below	er (give title v)	Other below	(specify)	
C/O HANOVER BANCORP, INC. 80 EAST JERICHO TURNPIKE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line)		idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person			
(Street) MINEOLA NY 11501													, A	Form filed by More than One Reporting Person				
(City)	(St	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 - Nor	n-Deriva	tive S	ecui	rities	Acq	uired,	Disp	osed of	, or B	ene	ficially	y Own	ed		
Date				Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)					ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or I	Price	Report Transa (Instr. 3	ed ction(s) 3 and 4)		(Instr. 4)
Common	Stock			01/31/2	2024				P		500	A		\$18	28	3,728	D	
Common	Stock														8	,846	I	See Footnote 1 ⁽¹⁾
Common	Stock														21	5,615	I	See Footnote 2 ⁽²⁾
Common	Stock														30),000	I	See Footnote 3 ⁽³⁾
Common Stock													85,769		I	See Footnote 4 ⁽⁴⁾		
Common Stock													32,692		I	See Footnote 5 ⁽⁵⁾		
Common Stock														52	2,771	I	See Footnote 6 ⁽⁶⁾	
		Та									sed of, onvertib				Owne	d		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution	med	ed 4. Transac Code (Ir		5. Number tion of			Exerci	able and 7. Title and Amount of		8. I De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber				

- 1. 8,846 shares held in various trusts for the benefit of the children of the Reporting Person, and of which the Reporting Person is a trustee.
- 2. 215,615 shares held in trusts for the benefit of the Reporting Person, and of which the spouse of the Reporting Person is a trustee
- 3. 30,000 shares held in various trusts for the benefit of the children of the Reporting Person, and of which the spouse of the Reporting Persons is a trustee
- 4. 85,769 shares held in various trusts for the benefit of the sibling of the Reporting Person, and of which the Reporting Person is a trustee
- 5. 32,692 shares held by the spouse of the Reporting Person.
- 6. 52,771 shares held by a limited liability company which is controlled by the Reporting Person

/s/ Gregory Krauss, POA

02/02/2024

** Signature of Reporting Person

** 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.