FORM 4

Federal Deposit Insurance Corporation Washington, D.C. 20549

 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

□ 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.

(Print or Type Responses)

1. 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)						
Lapointe	Jean-Pierre		Northeast	Northeast Bank [NBN]							Director Officer (give		0% Owner Other (specify			
(Last) (First) (Middle) C/O Northeast Bank			Transac	3. Date of Earliest4. If Amendment,Transaction RequiredDate Originalto be ReportedFiled(Month/Day/Year)						<u>X</u> Officer (give Other (specify title below) Chief Financial Officer belo						
27 Pearl Street	(Street)		— (Month	- (Month/Day/Year)							 Individual or Joint/Group Filing (Check Applicable Line) <u>X</u> Form filed by One Reporting Person Form filed by More than One Reporting Person 					
Portland	ME	04101	1/31/2024	2024						Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Ov									ally Owned				
1. Title of Security (Instr. 3)		2. Trans- action Date (Month/	2A. Deemed Execution Date, if any (Month/ Day/Year)	action		or D	. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Follow- ing Reported Transaction (s)	6. Owner- ship Form: Direct (D) or Indirect	 Nature of Indirect Beneficial Ownership 			
		Day/ Year)		Code	V	Am	ount	(A) or (D)	Price		(Instr. 3 and 4)	(I) (In- str. 4)	(Instr. 4)			
Voting Common Stock		1/31/2024		D		13,332	2(1)	D	\$54.83		13,918	D				

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).

Potential persons who are to respond to the collection of information contained (Over) in this form are not required to respond unless the form displays a currently valid SEC 1474 (02-23) OMB control number.

FORM 4	(continued)
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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. Conver- sion or Exercise Price of Deri- vative Security	action Date (Month/ Day/	3A. Deemed Execution Date, if any (Month/ Day/ Year)	act Co	tion ative Securities			6. Date Exer- cisable and Expiration Date (Month/Day/ Year)		 Title and Amount of Underly- ing Securities (Instr. 3 and 4) 		8. Price 9 of Deriv- ative Secur- ity (Instr. 5)	9. Number of deriv- ative Secur- ities Bene- ficially Owned at End of	ship Form of Deriv- ative Security: Direct (D) or Indirect	11. Nature of Indi- rect Ben- eficial Owner- ship (Instr. 4)
				Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title Number	Amount or of Shares		Month (Instr. 4)	(I) (Instr. 4)	

Explanation of Responses:

(1) Represents the forfeiture of a restricted stock award granted to the reporting person under the Northeast Bank 2021 Stock Option and Incentive Plan due to resignation.

** 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

Richard Wayne, Attorney-in-Fact 2/1/2

/**Signature of Reporting Person

2/1/2024

Date