FORM 4

\boxtimes	Check box if no longer
	subject to Section 16.
	Form 4 or Form 5
	obligations may continue.
	See instruction 1(b).

Federal Deposit Insurance Corporation Washington, D.C. 20429

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

(PLEASE PRINT OR TYPE ALL RESPONSES)

OMB APPROVAL	
OMB NUMBER: 3064-0030 EXPIRES: 07/31/2013 Estimated average burden hours per response0.5	

1. Name of Reporting Person (La	2. Issuer Name	e and Tickle	r or Tradin	g Symbol		5. Relationship of Reporting Person(s) to Issuer <i>(Check all applicable)</i> Director 10% Owner									
Pinheiro, Brian	Northeast Ban	k [NBN]													
Street Address C/O Northeast Bank 27 Pearl Street	 Date of Earliest Transaction Required to be Reported (<i>Month/Day/Year</i>) 09/21/2020 			lf Amendment, D Filed <i>(Month/Day</i>		Chief Risk Officer Chief Risk Officer 6. Individual or Joint/Group Filing (Check applicable box)									
						Fc Fc	Form filed by One Reporting Person								
City State ZIP Code									Form filed by More than One Reporting Person						
Portland	ME		04101												
		-					Acquired, Disp		-		6. Ownership	r			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execu- tion Date if any, (Month/	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dis of (D) (Instrs. 3, 4, and 5)		Jisposed	osed 5. Amount of Securities Beneficially Owned Follow- ing Reported		 Nature of Indirect Beneficial Ownership (Instr. 4) 			
				Day/ Year)	Code	v	Amount	(A) or (D)	Price	Transactions (Instr. 3 and 4)					
Voting Common Stock		09/21/2020			F	489	D	\$18.53	14,682	D					

FDIC 6800/04 (10-05)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. *(Continue on Page 2)* *If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Page ____ of ____

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)		3. Trans- action Date (Month/ Day/ Year)				Deriva Secur Acqui or Dispo (D) (Instre	5. Number of Derivative Securities Acquired (A) or Disposed of		able and ion Date // ar)	7. Title and Amount of Underlying Securities (Instrs. 3 and 4)		8. Price of De- rivative Security (Instr. 5)	9. Number of Derivative Securities Beneficiall		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Ex- ercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	

Explanation of Responses:

/s/ Jean-Pierre Lapointe, Attorney-in-fact

9/22/2020

**Signature of Reporting Person

Date

NOTE: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure (12 C.F.R. 335.612). 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 current, valid OMB Control Number. **Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

BURDEN STATEMENT

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