FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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

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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)					
<u>Dorsey Cheryl</u>					1110	NORTHEAST BANCORP /ME/ [NBN]								1,	X	Direc	,	10% (Owner	
				-									_			er (give title		(specify		
(Last)	ast) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 05/15/2019								belov	v)	below)	
C/O NORTHEAST BANCORP						03/13/2013														
500 CANAL STREET														+						
					- ^{4. lī}	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															X	Form	n filed by One	e Reporting Pers	son	
LEWIST	ON M	E C	14240												Form filed by More than One Reporting					
,					-											Pers	on			
(City)	(St	ate) (Zip)																	
		Tabl	e I - Non	-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed			
1. Title of S	ecurity (Inst	r. 3)		2. Trans	saction	Execution Date, if any			3.									6. Ownership	7. Nature	
				Date (Month/	/Day/Ye				Code	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			. 3, 4 a		Securi Benefi	cially	Form: Direct (D) or Indirect	of Indirect Beneficial		
						(Month/Day/Year)			ır) 8)				_	Reported		ed	(I) (Instr. 4)	Ownership (Instr. 4)		
						Code	l۷	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)							
No securities are beneficially owned 05/15					5/2019	9			J ⁽¹⁾		0	0 D		(1	(1)		0	D		
	Table II. Derivative Securities Acquired Disposed of an Repolicially Owned																			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of	2.	3. Transaction	3A. Deeme		4.				6. Date E						ice of	9. Number o		11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Dat if any	·	Transa Code (. Derivative (Expiration Date (Month/Day/Year)			Amount of Securities		Derivative Security		derivative Securities	Ownership Form:	of Indirect Beneficial	
(Instr. 3) Price of (Month/Da					8)	3)		Securities Acquired					Underlying Derivative		(Instr. 5)		Beneficially Owned	Direct (D) or Indirect	Ownership (Instr. 4)	
	Security	curity					(A) or Disposed					Security (Instr. and 4)					Following Reported	(I) (Instr. 4)		
						of (D) (Instr. 3, 4											Transaction (Instr. 4)	(s)		
				Į			and 5										,			
				Amoun																
									Data		Eveluation:		Nun	umber						
					Code V (A) (D)				Date Exercisal		Expiration Date	Title	Title of Shares							

Explanation of Responses:

1. Disposed of pursuant to the Agreement and Plan of Merger, dated as of January 7, 2019 (the "Merger Agreement"), between Northeast Bancorp (the "Company") and Northeast Bank (the "Bank"). Pursuant to the Merger Agreement, in exchange for each share of Company common stock the reporting person received one share of Bank common stock.

/s/ Jean-Pierre Lapointe,

05/16/2019

Attorney-in-fact

** 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.