Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number: 3235-0287 Estimated average burden										
	hours nor roomanas	. 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

Name and Address of Reporting Person* Daitch Peggy					Ste	2. Issuer Name and Ticker or Trading Symbol Sterling Bancorp, Inc. [SBT]									eck all app	onship of Reporting all applicable) Director		son(s) to Is 10% Ov	
(Last)	(F	irst) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/01/2024										Offic belov	er (give title v)		Other (s below)	specify
C/O STERLING BANCORP, INC. ONE TOWNE SQUARE, SUITE 1900					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	ndividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person				.	
(Street) SOUTHFIELD MI 48076				Dul	Dula 10h5 1(a) Transaction Indication									Form filed by More than One Reporting Person					
(City)	3)	itate) (.	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contrastity the affirmative defense conditions of Rule 10b5-1(c). See Instruction									uction or writ	ten plar	n that is inter	nded to		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Exec		Deemed cution Date, ny nth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securit Disposed 5)		Disposed C	es Acquired (A) o Of (D) (Instr. 3, 4		(A) or 3, 4 and	d Securi Benefi	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	Price	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock 01/01/2					2024			A		7,500(1)	A	4	\$0.00	0 3	30,864		D		
	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)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	or	ount mber ires					

Explanation of Responses:

1. Represents award of restricted stock dated January 1, 2024 pursuant to the Sterling Bancorp, Inc. 2020 Omnibus Equity Incentive Plan ("Plan"). The shares of restricted stock will vest over a three-year period as follows: 2,475 shares on January 1, 2025, an additional 2,475 shares on January 1, 2026, and the remaining 2,550 shares on January 1, 2027 subject to continued Service on each such date, or, if earlier, upon death or Disability or a Change of Control, all as specified in the Plan.

> /s/ Peggy Daitch by Elizabeth M. Keogh, attorney-in-fact

01/05/2024

** 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.