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

OMB APPROVAL
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hours per response... 0.5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 $\stackrel{\text { * }}{ }$ <br> Grasso Maria A |  | 2. Issuer Name and Ticker or Trading Symbol <br> FLUSHING FINANCIAL CORP [ FFIC |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |
| (Last) 220 RXR PList) (Middle) | (Middle) | 3. Date of Earliest Transaction (MM/DD/YYYY)6/13/2024 |  |  |  |  |  |  |  |  |  |
| UNIONDALE, NY 11556 |  | 4. If Amendment, Date Original Filed (MM/DD/YYYY) |  |  |  |  |  | 6. Individual or Joint/Group Filing (Check Applicable Line) <br> $\mathbf{X}_{-}$Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |  |
| (City) (State) (Zip) | (Zip) |  |  |  |  |  |  |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l} \hline \text { 1.Title of Security } \\ \text { (Instr. 3) } \end{array}$ | 2. Trans. Date | 2A. Deemed <br> Execution <br> Date, if any | 3. Trans. Code <br> (Instr. 8) |  | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |  |  | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) |  | 6. <br> Ownership <br> Form: <br> Direct (D) <br> or Indirect <br> (I) (Instr. <br> 4) | 7. Nature <br> of Indirect <br> Beneficial <br> Ownership <br> (Instr. 4) |
|  |  |  | Code | v | Amount | $\begin{aligned} & \text { (A) or } \\ & \text { (D) } \end{aligned}$ | Price |  |  |  |  |
| Common Stock | 6/13/2024 | 6/13/2024 | I |  | 14,889 ! 1 ). | D | \$12.05 |  | 12,003 (2). | I | 401k |
| Common Stock |  |  |  |  |  |  |  |  | 87,738 | D |  |
| Common Stock |  |  |  |  |  |  |  |  | 655 | I | Spouse |

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivate Security (Instr. 3) | 2. <br> Conversion or Exercise Price of Derivative Security | 3. Trans. Date | 3A. Deemed Execution Date, if any | 4. Trans. 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 |  | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) |  | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative <br> Securities <br> Beneficially <br> Owned <br> Following <br> Reported <br> Transaction(s) <br> (Instr. 4) | 10. <br> Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |  |  |  |  |

## Explanation of Responses:

(1) Intraplan sale of Company Stock in the Flushing Bank 401k.
(2) Shares held in the Flushing Bank 401k a/o 6/14/24.

Reporting Owners

| Reporting Owner Name / Address | Relationships |  |  |
| :--- | :--- | :--- | :--- |
|  | Director | $10 \%$ Owner | Officer |
| Other |  |  |  |
| Grasso Maria A |  |  | SEVP |
| 220 RXR PLAZA |  |  |  |
| UNIONDALE, NY 11556 |  |  | SEP |

## Signatures

Signed by Russell A. Fleishman under POA by Maria A. Grasso

$$
\frac{\mathbf{6 / 1 7 / 2 0 2 4}}{\text { Date }}
$$

${ }^{* *}$ Signature of Reporting Person

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. $78 \mathrm{ff}(\mathrm{a})$.
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 control number.

