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

☐ 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

OMB Number: 3235-0287 Estimated average burden 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 *				2	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer			
GRASSI LOUIS C				F 1	FLUSHING FINANCIAL CORP [FFIC							IC	(Check all applicable) _X_ Director10% Owner			
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							Office	r (give title belov	v)Oth	ner (specify b	pelow)
220 RXR PLAZA					1/30/2024											
(Street)			4	4. If Amendment, Date Original Filed (MM/DD/YYYY)							Y) 6. Individu	6. Individual or Joint/Group Filing (Check Applicable Line)				
UNIONDALE, NY 11556 (City) (State) (Zip)												X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
,				- Non-D	erivat	ive Secu	rities Acq	μire	ed, Dis	posed of	f, or l	Beneficially O	wned			
1. Title of Security (Instr. 3) 2. Trans. I			2. Trans. Dat	Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities Acqui or Disposed of (D) (Instr. 3, 4 and 5)				Amount of Securities Beneficially Owned sllowing Reported Transaction(s) sstr. 3 and 4)		Ownership of Indire Form: Benefici Direct (D) Ownersh	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amou	(A) or (D)	Pri	ce			(I) (Instr. 4)	(msu. 4)
Common Stock				1/30/2024			A		4,80	0 A		(<u>1)</u>		113,621	D	
	Tabl	le II - Der	ivative S	Securitie	s Ben	eficially	Owned (a	e.g.,	puts,	calls, wa	rran	ts, options, cor	vertible sec	urities)		
		Execution	n (Instr.		Derivativ Acquired Disposed	Number of erivative Securities equired (A) or isposed of (D) nstr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			e and Amount of ities Underlying ative Security 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial	
		Code	v V	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Numbe Shares	r of	Transaction(s) (Instr. 4)				

Explanation of Responses:

(1) Grant of Restricted Stock Units payable in common stock upon vesting one year from date of grant.

Reporting Owners

Reporting Owner Name / Addres	Relationships						
Reporting Owner Name / Addres	Director	10% Owner	Officer	Other			
GRASSI LOUIS C							
220 RXR PLAZA	X						
UNIONDALE, NY 11556							

Signatures

Signed by Russell A. Fleishman under Power of Attorney by Louis C. Grassi

2/1/2024

**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).

File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Note:

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.