## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287
Estimated average bi	urden
hours per response:	0.5

to Section 10	ox if no longer subje 6. Form 4 or Form 5 nay continue. <i>See</i> (b).		Filed pursuant to Section 16(a) of the Securities Exchange Act of 193	OMB Number: 3235- Estimated average burden hours per response:	-0287 0.5	
1. Name and Ad Lentinello	ldress of Reporting <u>S David</u>		or Section 30(h) of the investment Company Act of 1940   2. Issuer Name and Ticker or Trading Symbol   StoneCastle Financial Corp.   [ BANX ]	AL OWNERSHIP Estimated average burden hours per response:   Estimated average burden hours per response: Estimated average burden hours per response:   X 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)   Director 10% Owner   X Officer (give title Other (specify below)   V/Year) 6. Individual or Joint/Group Filing (Check Applica Line)   X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(Last) (First) (Middle) C/O STONECASTLE FINANCIAL CORP. 100 FILLMORE STREET, SUITE 325			3. Date of Earliest Transaction (Month/Day/Year) 03/26/2020		below)	ify
(Street) DENVER	СО	80206	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form filed Form filed	by One Reporting Person	
(City)	(State)	(Zip)				
		Table I - Non-De	rivative Securities Acquired, Disposed of, or Bene	ficially Owned		

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	03/26/2020		Р		1,000	A	\$16.24	1,000	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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	Amount or Number of Shares				

Explanation of Responses:

**Remarks:** 

## /s/ S.David Lentinello

\*\* Signature of Reporting Person Date

03/31/2020

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.