FORM 4

Check this box if no

Section 16. Form 4 or

longer subject to

Form 5 obligations

may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB 3235-0287 Number:

OMB APPROVAL

Estimated average burden

hours per 0.5 response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

1. Name and Address of Reporting Person* Reddy Avutu							Symbol							Relationship of Reporting Person(s) Issuer heck all applicable)				
						. *				•			X	Direct	or	10	% Owner	
(Last) (First) (Middle) C/O SYRA HEALTH CORP. 1119 KEYSTONE WAY N., #201							3. Date of Earliest Transaction (Month/Day/Year) 10/09/2023							Office title b		(s	her pecify low)	
1113 KL131ONE WAI N., #201							4. If Amendment, Date of Original Filed							Individual or Joint/Group Filing				
(5)							(Month/Day/Year)							Check Applicable Line)				
(Street) CARMEL IN 46032													Form filed by One Reportin Person			porting		
(City) (State) (Zip)														Form filed by More than One Reporting Person				
			Table I	roM -	n-Deriv	ative S	ecuri	ties Ac	quire	ed, D	isposed	of, or l	Beneficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transact on Date (Month/L ay/Year)					Exe D n D any		f 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership		
						(Month/D ay/Year)		v	A	mount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(I) (Instr. 4)			
				Tab							sed of, or onvertible		ially Owned es)					
1. Title of Derivative Security (Instr. 3)	2. Conversi on or Exercise Price of Derivativ	3. Transact ion Date (Month/ Day/Year)	3A. Deemed Executio n Date, if any (Month/		nsaction Instr. 8)	5. Number Derivative Securities (A) or Dis	. Number of erivative ecurities Acquired A) or Disposed of D) (Instr. 3, 4 and		(Month/Day/		(Instr. 3 and 4)		of Securities	8. Price of Derivative Security (Instr. 5)	9. Numb of derivativ Securitie Beneficie Owned	Owners Form: Direct (ally (I) (Inst	Beneficial D) Ownership ect (Instr. 4)	
	e Security		Day/Year)	Code	v	(A)	(D)	Da Exer bl	cisa	Expirat ion Date	Title		Amount or Number of Shares		Following Reported Transacti (s) (Instr.	tion		

\$2.68 **Explanation of Responses:**

Stock Options

1. The options shall vest in four equal annual installments with the first installment vesting on the date of grant.

/s/ Deepika Vuppalanchi, as Attorney-in-Fact for

10,000

Class A Com Stock

10/09/ 2033

10/10/2023

10,000

Avutu S. Reddy

** Signature of Reporting Date

Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

10,000

^{*} 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.