FORM 4

Check this box if no

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 for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB	APPROVAL

OMB 3235-0287 Number:

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

Rule 10	e conditi 0b5-1(c). tion 10.																			
1. Name and Address of Reporting Person* Paranjape Ketan							2. Issuer Name and Ticker or Trading Symbol Syra Health Corp [SYRA]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
		- -									Direct	or	10% Owner							
(Last) (First) (Middle) C/O SYRA HEALTH CORP.							3. Date of Earliest Transaction (Month/Day/Year) 11/14/2024									Officer (give title below)			Other (specify below)	
1119 KE	YSTO	VE WA	Y N., #	201																
											ndividual or Joint/Group Filing eck Applicable Line)									
(Street) CARMEL IN 46032							Y Form filed by One Reporting Person											rting		
	-										Form filed by More than One Reporting Person									
(City)	(St																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact on Date (Month/I ay/Year)						cti De E Ex /D n	Executio		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a						6. Owner Form: Direct or Ind (I) (In:	ship (D) irect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							/Year)	Code	٠ ١	,	Aı	mount	(A) or (D)	Price			4)			
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. Conversi on or Exercise Price of Derivativ	3. Transact ion Date (Month/ Day/Year)	3A. Deemed Executio n Date, if any (Month/ Day/Year)		4. Transaction Code (Instr. 8)		i. Number of Derivative Securities Acquir A) or Disposed o D) (Instr. 3, 4 an		f (Month/Day/				d Amount o	f Securities	8. Price of Derivative Security (Instr. 5)	9. Numb of derivati Securiti Benefici Owned Followir	ve Fo es Dir ally or	nership rm: rect (D) Indirect (Instr.	Beneficial Ownership	
	e Security			Code	v	(A)	(D)	Ex	Date ercisa ble		oirat on ate	Title		Amount or Number of Shares		Reporte Transac (s) (Inst	d tion			

\$0.3683 **Explanation of Responses:**

Stock Options

11/14/20

1. The options were issued pursuant to the Issuer's 2022 Omnibus Equity Incentive Plan and vest as follows: (i) 25% of the options vested immediately on the date of grant and (ii) the balance of the options shall vest in 12 equal monthly installments.

11/14, 2034

19,303

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

19,303

Class A Comp Stock

11/18/2024

19,303

D

Ketan Paranjape

** 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. 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.