### FORM 4

Check this box if no

Section 16. Form 4 or

longer subject to

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 defense conditions of

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

# OMB APPROVAL

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

1. Name a	Symbol						to Is	Relationship of Reporting Person(s) Issuer Check all applicable)								
							X				6 Owner					
(Last) (First) (Middle) C/O SYRA HEALTH CORP. 1119 KEYSTONE WAY N., #201						3. Date of Earliest Transaction (Month/Day/Year) 11/14/2024							Office title bo		Oth (sp bel	ecify
													Individual or Joint/Group Filing heck Applicable Line)			
(Street) CARMEL IN 46032					(Month)	ouy/16	ui)				X	Ганна 4	filed b	y One Rep	orting	
(City)	(S1	ate)	(2	Zip)									Form 1 Repor		y More tha erson	n One
				- Non		tive Secu	_	Acqui	<del>-</del>				_			·
1. Title of Security (Instr. 3) 2. Transact on Date (Month/C ay/Year)					Execution Date, i	Code 8)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amou Securiti Benefici Owned Followir	es ally ng	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						(Month/l ay/Year)		e V	А	mount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)	(I) (Instr. 4)	
													4)			
				Tabl		ivative Secu							(4)			
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/	4. Tran	saction str. 8)		warrar 6. Ex ired Ex of (M		e and Date	onvertible 7. Title and	securitie  Amount of Derivative	Securities	8. Price of Derivative Security (Instr. 5)	9. Numb of derivativ Securitiv Benefici Owned	Ownersh Form: Direct (D or Indirect (I) (Instr.	Beneficial Ownership
Derivative Security	Conversi on or Exercise Price of	Transact ion Date (Month/	Deemed Executio n Date, if any	4. Tran	saction str. 8)	, puts, calls i. Number of Derivative Securities Acqu A) or Disposec D) (Instr. 3, 4 i)	warrar 6. Ex ired Ex of (M	Date Cercisable	e and Date	7. Title and Underlying	Amount of Derivative d 4)	Securities	8. Price of Derivative Security	of derivati Securiti Benefici	Ownersh Form: Direct (D or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership

#### **Explanation of Responses:**

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.

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

11/18/2024

**Sherron Rogers** 

\*\* 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.