FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
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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 for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

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

10b5-1(c). Se	e Instruction 10.			
Name and Address of Reporting Person* <u>Casey Ted</u>			2. Issuer Name and Ticker or Trading Symbol STRYVE FOODS, INC. [SNAX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner
	Casey Ted Last) (First) (Middle) C/O STRYVE FOODS, INC.		3. Date of Earliest Transaction (Month/Day/Year)	
(Last)	(First)	(Middle)	05/23/2024	Officer (give title Other (specify below) below)
C/O STRYVE FOODS, INC. POST OFFICE BOX 864			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person
(Street)				Form filed by More than One Reporting Person
FRISCO	TX	75034		
(City)	(Stata)	(7in)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 2. Deemed Execution Date, (Month/Day/Year) 2. Transaction Execution Date, if any (Month/Day/Year) 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a)				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership				
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	05/23/2024		A ⁽¹⁾		4,125	A	\$0	40,351	D	
Class A Common Stock	05/23/2024		A ⁽²⁾		12,375	A	\$0	52,726	D	
Class V Common Stock								99,421	D	
Class A Common Stock								25,887	I	See Footnote ⁽³⁾

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		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		5. Num Derivat Securit Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and A Securities Un Derivative So (Instr. 3 and	nderlying ecurity	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

- 1. Represents director's fees paid in restricted stock from the Issuer's Omnibus Incentive Plan.
- 2. Award of restricted stock under the Stryve Foods, Inc. 2021 Omnibus Incentive Plan. Shares vest in equal increments of 4,125 shares on June 30, 2024, September 30, 2024, and December 31, 2024, subject to continued service.
- 3. One-half of the securities are owned by the TRC GST TRFBO Trinity Jennifer Wommack Casey BTD 09302011 and the other half are owned by TRC GST TRFBO Avery Maryanna Wommack Casey BTD 09302011. Thomas Farrell Casey is the trustee and control person of, with voting and dispositive power over the securities held by, such trusts. The reporting person disclaims beneficial ownership of the securities owned by the trusts.

/s/ Ted Casey by John J. Wolfel, Attorney-in-Fact

05/28/2024

** 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).

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.