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## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	OVAL
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 that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction

## 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 and A	Address of Repor	rting Person <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol Strawberry Fields REIT, Inc. [ STRW ]	Issuer	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 3050 BISCA	(First)	(Middle) SUITE 302	3. Date of Earliest Transaction (Month/Day/Year) 07/23/2024	X	Director Officer (give title below)	10% Owner Other (specify below)			
(Street)  MIAMI  (City)	FL (State)	33137 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/ Year)		vidual or Joint/Group able Line) Form filed by One F Form filed by More Reporting Person	Reporting Person			

Table I – Non-I	Derivative S	ecurities	Acqu	iire	d, Dispos	ed of	, or Be	neficially Ow	ned	
1. Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)	2A. Deemed Execution Date, if any	3. Transac Code (Ir 8)					5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		(Month/ Day/ Year)	Code	V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	07/23/2024		P		1,746	A	\$9.93	103,927	I	Cameo Life Sciences Investment, LLC

		Table I				Acquired, Dispo nts, options, co	•		y Owned	10. 11. Nature Ownership Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4)												
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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed	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)	Ownership Form: Direct (D)	of Indirect Beneficial Ownership											

	of (D (Instr 4 and	. 3,					(Instr. 4)		
Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

**Explanation of Responses:** 

Remarks:

/s/ Jack Levine

07/25/2024

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4(b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).