

(Print or Type Responses)

1. Name and Address of Reporting Person*

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPROVAL | | | | | |
|--------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0104 | | | | |
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| nours per response | | | | | |

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

3. Issuer Name and Ticker or Trading Symbol

2. Date of Event Requiring

| Audibert John | | | Statement (Month/Day/Year) | | ar) Stran & Com | Stran & Company, Inc. [STRN] | | | | | |
|--|-------------------|-------------------------------|--------------------------------------|------------------------------------|--|--|--------------------------------------|---|---|------|--|
| (Last) (First) (Middle) C/O STRAN & COMPANY, INC., 2 HERITAGE DRIVE, SUITE 600 | | | 2021 | | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | |
| QUINCY,, MA | (Street) 02171 | | | | | X Officer (give below) | X Officer (give title Other (specify | | | | |
| (City) | (State) | (Zip) | | | Т | able I - Non-Deriva | tive Securiti | es Benef | ficially O | wned | |
| 1.Title of Security (Instr. 4) | | | Ве | Beneficially Owned F (Instr. 4) (I | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | (Instr. : | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Reminder: Report or | Persons | s who respon the form disp | d to the c lays a cui | collection or rently val | of info | ed directly or indirectly. ormation contained in B control number. ned (e.g., puts, calls, wa | | · | | | |
| 1. Title of Derivative Security (Instr. 4) 2. Date Fand Expired | | . Date Exe | e Exercisable 3. Title an Securities | | le and Amount of rities Underlying Derivati | 4. Conversion | 5. Ov Form Deriv | vnership | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Security | (D) c (I) (Instr | r Indirect . 5) | | |
| Reporting | Owners | | | | | | | | | | |

| | Relationships | | | | |
|--|---------------|--------------|---------------------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| Audibert John C/O STRAN & COMPANY, INC. 2 HERITAGE DRIVE, SUITE 600 QUINCY,, MA 02171 | | | VP of Growth and SI | | |

Signatures

| /s/ John Audibert | 11/08/2021 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

No securities are beneficially owned

- If the form is filed by more than one reporting person, see Instruction 5(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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.