FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
-------------	------	-------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours ner resnonse.	0.5							

Instruc	tion 1(b).		File	d pursua or Se	nt to S ction 3	Section 16(a) 30(h) of the I	of the S nvestme	ecurit nt Co	ies Exchang mpany Act o	e Act of f 1940	f 1934			liouis	perie	эропэс.	0.5
Name and Address of Reporting Person*     DeVriese Fay					2. Issuer Name <b>and</b> Ticker or Trading Symbol SPAR Group, Inc. [SGRP]					(Chec	k all app	tor	•	10% O	wner		
l	(Last) (First) (Middle) C/O SPAR GROUP, INC. 1910 OPDYKE COURT				3. Date of Earliest Transaction (Month/Day/Year) 09/09/2021						X Officer (give title Other (specify below) below)  Chief Financial Officer						
(Street) AUBUR HILLS (City)	M)		8326 Zip)	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line) X					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquire Disposed Of (D) (Instr. 5)					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) (D)	or <sub>Pri</sub>	Transa		action(s) 3 and 4)			(Instr. 4)
Common	Stock, \$.01	par value	09/09	/2021			S		14,670	Γ	\$	\$1.67 2 D			D		
		Tal	ole II - Deriva (e.g., p			ties Acqu varrants,							Owne	d			
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Frice of Derivative Security (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Transaction Code (Instr. 8) Securiti Acquire (A) or Dispose of (D)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)			int of ities rlying ative ity (Inst	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

**Explanation of Responses:** 

/s/ Fay DeVriese

Expiration Date

09/10/2021

\*\* Signature of Reporting Person Date

Amount or Number

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).

Code

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.

(A) (D) Date

Exercisable