FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
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## 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

1. Name and Address of Reporting Person*  Novgorodtsev Igor	2. Date of E Requiring S (Month/Day 05/29/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol SPAR GROUP INC [ SGRP ]							
(Last) (First) (Middle) C/O SPAR GROUP, INC.			Relationship of Reporting Pelssuer     (Check all applicable)			( )		5. If Amendment, Date of Original Filed (Month/Day/Year)		
333 WESTCHESTER AVE, SOUTH BLDG, STE 204			X Director Officer (give title below)	10% Ow Other (s below)	(specify	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting				
(Street) WHITE PLAINS NY 10604								Person	by More than One Person	
(City) (State) (Zip)										
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		Direct ndirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock, \$.01 par value			383,739		D					
Common Stock, \$.01 par value			570,262 I			See footnote <sup>(1)</sup>				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)			d 3. Title and Amount of Securitie Underlying Derivative Security (Instr. 4)					ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
l L								Form: Direct (D)	Ownership (Instr. 5)	

## Explanation of Responses:

1. Beneficially owned through Lares Capital LLC.

/s/ Igor Novgorodtsev 06/24/2020

Date

\*\* Signature of Reporting Person

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

- $^{\star}$  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.

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.