FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 3235-0104 |
|--------------------------|-----------|
| Estimated average burden | |
| hours per response: | 0.5 |

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

| Name and Address of Reporting Person* Parekh Adarsh | | | 2. Date of Event Requiring Statement (Month/Day/Year) 01/14/2025 | 3. Issuer Name and Ticker or Trading Symbol Sidus Space Inc. [SIDU] | | | | | |
|---|---------|----------|--|---|---------------------------------|--|--|--|--|
| (Last) | (First) | (Middle) | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | |
| C/O SIDUS SPACE, INC. 150 N. SYKES CREEK PARKWAY, SUITE 200 | | | X | Officer (give title below) Chief Financial O | 10% Owner Other (specify below) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | |
| (Street) MERRITT ISLAND | FL | 32953 | | | | | Form filed by More than One Reportin Person | | |
| (City) | (State) | (Zip) | | | | | | | |

Table I - Non-Derivative Securities Beneficially Owned

| Indirect (I) (Instr. 5) | 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or | 1 ' |
|-------------------------|---------------------------------|--|-------------------------------------|-----|
|-------------------------|---------------------------------|--|-------------------------------------|-----|

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| Title of Derivative Security (Instr. 4) 2. Date Exercisab Expiration Date (Month/Day/Year) | | ate | Derivative Security (Instr. 4) | | Conversion Form: Direct or Exercise (D) or | Form: Direct | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---------------------|--------------------|--------------------------------|-------------------------------------|--|--------------|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | Price of Indirect (I) Derivative (Instr. 5) Security | | |

Explanation of Responses:

No securities are beneficially owned.

/s/ Adarsh Parekh

02/26/2025

** 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.

 $^{^{\}star}$ 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).