FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

ington, D.C. 20549	OMB APPROVAL						
ES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287					

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

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

STATEMENT OF CHANG

OMB APPROVAL						
OMB Number: 3235-0287						
Estimated average burden						
hours per response	: 0.5					

1. Name and Address of Reporting Person* Agarwal Indira				2. Issuer Name and Ticker or Trading Symbol Stronghold Digital Mining, Inc. [ SDIG ]								(Che	5. Relationship of Reporting Person(s) to Iss (Check all applicable)  X Director 10% Ow							
(Last)	(Fir	est) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/15/2024									Office below	er (give title /)		Other (s below)	pecify		
595 MADISON AVENUE 28TH FLOOR					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
(Street) NEW YO	YORK NY 10022													Form filed by More than One Reporting Person						
(City)	(St		Zip)		Rule 10b5-1(c) Transaction Indication  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 10.									ded to						
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficiall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execu ny/Year) if any		Deemed cution Date, y nth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed (5)		es Acquired (A) Of (D) (Instr. 3, 4		(A) or 3, 4 and		ies cially Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	nount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				msu. 4)		
Class A common stock, par value \$0.0001 04/15/2					2024			A		5,307 A		<b>\</b>	\$3.15	5 40,437		I	)			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date urity or Exercise (Month/Day/Year)   Execution Date, if any		4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Di or (I)	). wnership orm: irect (D) · Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code V (		(A)	(D)	Date Exercis	able	Expiration e Date Title		Amo or Num of Shar	nber						

**Explanation of Responses:** 

## Remarks:

Pursuant to the Issuer's Non-Employee Director Compensation Policy (the "Policy"), non-employee directors receive fully vested shares of Issuer's Class A common stock ("Stock") as an annual retainer for their service on the Issuer's board, unless they elect otherwise, consistent with their Stock ownership obligations. In accordance with the Policy, the reporting person was issued shares of Stock for the portion of the annual retainer covering the first quarter of fiscal year 2024.

> /s/ Matthew Usdin, as Attorney-in-fact for Indira

04/17/2024

**Agarwal** 

\*\* Signature of Reporting Person Date

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).

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.