FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See

Instruction 1(b).

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

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

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

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* Palermo Theresa						2. Issuer Name and Ticker or Trading Symbol Academy Sports & Outdoors, Inc. [ ASO ]							Relationship leck all appli Directo	cable)	Person(s) to	Issuer Owner
(Last)	(Fi	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/14/2024							Officer below)	(give title	Othe belo	er (specify w)
C/O ACADEMY SPORTS AND OUTDOORS, INC. 1800 NORTH MASON ROAD					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)					Lin	dividual or Joint/Group Filing (Check Applicable )  Form filed by One Reporting Person Form filed by More than One Reporting				
(Street) KATY	T	ζ ,	77449		Ru	ıle 1	0b5-	1(c	) Transa	ction Ir	ıdicatioı	<u> </u> 1	Persor	1		
(City)	(St	ate) (	Zip)			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.										
		Tabl	e I - Non	-Deriv	ative	Sec	urities	s Ac	quired, D	isposed	of, or B	eneficia	ly Owne	t		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		Code (Ins	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			Benefici	es Form ally (D) of following (I) (Ir	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	Amou	nt (A)	or Price	Transac (Instr. 3	tion(s)		(ilisti. 4)
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Date,	4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount Securitie Underlyi Derivativ	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form: Direct ( or Indir (I) (Insti	Beneficial Ownership oct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiratio Date	n Title	Amount or Number of Shares				
Restricted Stock Units <sup>(1)</sup>	(2)	06/14/2024			A		2,929		(3)	(3)	Common	2,929	\$0	2,929	D	

## **Explanation of Responses:**

- 1. Granted under the Company's 2020 Omnibus Incentive Plan, as amended (the "Plan").
- 2. Each restricted stock unit represents a contingent right upon vesting to receive one share of Issuer common stock, par value \$0.01 per share ("Common Stock").
- 3. On June 14, 2024, the Reporting Person was granted 2,929 time-based restricted stock units that vest 100%, subject to the Reporting Person's continued service with the Issuer, on the earliest of (i) the first anniversary of the date of grant, or, if earlier, the date which is the business day immediately preceding the date of the next Annual Meeting of Stockholders, (ii) the Reporting Person's termination due to death or Disability (as defined in the Plan), or (iii) a Change in Control (as defined in the Plan).

## Remarks:

/s/ Gary Holland, Attorney-in-**Fact** 

06/14/2024

\*\* Signature of Reporting Person

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.