FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 2	20549
--------------------	-------

STATEMENT	OF	CHANGES	IN	BENEFICIAL	OWNERSHIP
	O.	CHAILOEG		DEILE IOIAE	CITILITIES

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

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

Name and Address of Reporting Person* Field Ezra S.					2. Issuer Name and Ticker or Trading Symbol Reservoir Media, Inc. [RSVR]									elationship of Reporti ck all applicable) Director		ing Person(s) to Is			
(Last)	(Fi	rst) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024									Office below	er (give title		Other (s below)	specify	
C/O RESERVOIR MEDIA, INC. 200 VARICK STREET, SUITE 801A					4. If A								Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person					
(Street) NEW YO	ORK N	<i>Y</i> 1	0014			Form filed by More than One Reporting Person											orting		
(City)	(St	ate) (Z	Zip)		$ _{\square}$	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.													
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execu ay/Year) if any		Deemed cution Date, ly nth/Day/Year)		Transaction Disposed Code (Instr. 5)		Disposed (ities Acquired (A) d Of (D) (Instr. 3, 4		(A) or 3, 4 and	Securit Benefic	urities eficially ed Following		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or F	Price	Transa	action(s) . 3 and 4)			(Instr. 4)
Common	stock, \$0.0	001 par value		02/16/	2024			A ⁽¹⁾		1,795	A	\	\$0.00	139,363			D		
	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)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			saction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative irities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		nstr.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Ily Dire or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V (A) (D)			Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber						

Explanation of Responses:

1. Represents common stock, \$0.0001 par value per share, of Reservoir Media, Inc. (the "Issuer") awarded under the Reservoir Media, Inc. 2021 Omnibus Incentive Plan (the "Plan"). The Reporting Person received these shares in connection with the Reporting Person's quarterly compensation for service as a non-employee director.

Remarks:

/s/ James A. Heindlmeyer, as attorney-in-fact for Ezra S. **Field**

** Signature of Reporting Person

02/21/2024

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.