FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN 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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person * Reed Chris Lavern				2. Issuer Name and Ticker or Trading Symbol Byrna Technologies Inc. [BYRN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 100 BURTT RD., SUITE 115				3. Date of Earliest Transaction (Month/Day/Year) 07/20/2021							Office	er (give title belo	ow)	Other (specify b	elow)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
ANDOV:	ER, MA 0	1810										Form the	ed by More man	One Reporting	reison	
(City))	(State)	(Zip)		Т	able I	- Non	-Deriv	ative S	Securities	Acqu	ired, Disp	osed of, or l	Beneficially (Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year				(A) or Disposed o (Instr. 3, 4 and 5)		of (D)	Beneficia	nt of Securities ally Owned Following I Transaction(s)		Ownership	V. Nature of Indirect Beneficial		
						ode	V	Amoun	(A) or	Price	(Instr. 3 a	nd 4)		\ /	Ownership (Instr. 4)	
Common	Stock		07/20/2021				P		476	A	\$ 21	3,751			D	
			Table II - I				t	the for d, Disp	rm dis	splays a of, or Ben	curre eficial	ntly valid	OMB con	spond unle trol numbe		
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date	4. Tran Code	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Expiration		7. T Amo Und Sect (Ins 4)	Amount or Number	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form of Derivatir Security Direct (I or Indire	Beneficial Ownership (Instr. 4)
				Coo	le V	(A)	(D)	LACICI	Saure	Date		of Shares				

Reporting Owners

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Reed Chris Lavern 100 BURTT RD. SUITE 115 ANDOVER, MA 01810	X					

Signatures

/s/ Lisa Wager, by Power of Attorney	08/04/2021		
**Signature of Reporting Person	Date		

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.