FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| no longer subject to | |
|----------------------|--|
| 4 or Form 5 | |
| ontinue See | |

(State)

Oasis Investments II Master Fund Ltd.

(First)

K3

(State)

1. Name and Address of Reporting Person*

31 QUEEN'S ROAD CENTRAL

25/F, LHT TOWER

(Zip)

(Middle)

00000

(Zip)

(City)

(Street) CENTRAL

(City)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

Check this box to indicate that a transaction was made pursuant to a

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

| for the securit intende defens | ct, instruction o purchase or sa ies of the issue ed to satisfy the e conditions of ee Instruction 1 | le of equity r that is affirmative Rule 10b5- | | | | | | | | | | | | | | | | | | |
|---|---|--|---|--------------|---|----------------------------|------------------------------|---------------|---|-----------------------------|-------|--|---------|---|--|---|--------------------------|--|--|--|
| Name and Address of Reporting Person* Oasis Management Co Ltd. | | | | | 2. Issuer Name and Ticker or Trading Symbol STRATUS PROPERTIES INC [STRS] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director | | | | | | |
| (Last) (First) (Middle) 25/F, LHT TOWER | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/30/2024 | | | | | | | | | Director | | | | | | |
| 31 QUEEN'S ROAD CENTRAL (Street) CENTRAL K3 00000 (City) (State) (Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | | | | n | | | | | |
| | | Table | I - Non-Deriva | tive S | Sec | urities | Acq | uirec | l, Dis | posed o | of, (| or Ben | neficia | ally Own | ed | | | | | |
| 1. Title of | Security (Ins | tr. 3) | 2. Transaction Date (Month/Day/Year) | if any | utior ' | ned n Date, ay/Year) | 3. Transa Code (8) | | | curities Acc osed Of (D) | | | nd 5) | 5. Amount Securities Beneficiall Owned Following | | 6. Owner Form: D (D) or Indirect (Instr. 4) | Direct (I) | 7. Nat Indire Benef Owne (Instr. | ct icial rship | |
| | | | | | | | Code | v | Amou | unt (A) | or | Price | | Reported Transaction (Instr. 3 and | | | | | | |
| Common Stock, par value \$0.01 per share | | 08/30/2024 | | | S | | 83 | 30 I |) | \$27.5256(1 | | 1,143,210 | | I | | See footnotes ⁽²⁾⁽³⁾ | | | | |
| | | Tal | ole II - Derivati (e.g., pu | | | | | | | | | | | | d | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Perivative Conversion Date cecurity or Exercise (Month/Day/Year) | | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa | Transaction Code (Instr. | | ımber | 6. Date | e Exercisable and tion Date I/Day/Year) | | 7 A S | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | deriva Securi Benefi Owned Follow Repor | ities icially d ving ted action(s) | Form Direct or Inc | n: ct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | | or Nu of | umber | | | | | | | |
| | | Reporting Person* | | | | | | | | | | | | | | | | | | |
| | T TOWER | (First) | (Middle) | | | | | | | | | | | | | | | | | |
| (Street) | A L | K3 | 00000 | | - | | | | | | | | | | | | | | | |

| 1. Name and Address of Reporting Person* Fischer Seth | | | | | | | | | | |
|--|---------|-------|--|--|--|--|--|--|--|--|
| (Last) (First) (Middle) | | | | | | | | | | |
| C/O OASIS MANAGEMENT (HONG KONG) LLC | | | | | | | | | | |
| 25/F, LHT TOWER, 31 QUEEN'S ROAD | | | | | | | | | | |
| (Street) CENTRAL | K3 | 00000 | | | | | | | | |
| (City) | (State) | (Zip) | | | | | | | | |

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$27.3839 to \$27.755, inclusive. The Reporting Persons undertake to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth herein.
- 2. The securities to which this filing relates are held directly by Oasis Investments II Master Fund Ltd., a Cayman Islands exempted company (the "Oasis II Fund"). Oasis Management Company Ltd., a Cayman Islands exempted company (the "Investment Manager"), is the investment manager of Oasis II Fund. Seth Fischer, is responsible for the supervision and conduct of all investment activities of the Investment Manager, including all investment decisions with respect to the assets of the Oasis II Fund.
- 3. The filing of this statement shall not be deemed an admission that any of the Reporting Persons is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Act of 1934, as amended, or otherwise. Each of the Reporting Persons expressly disclaims beneficial ownership of the securities reported herein except to the extent of its or his pecuniary interest therein, if any.

/s/ Oasis Management

Company Ltd., By: Phillip 09/04/2024

Meyer, its General Counsel

/s/ Oasis Investments II

Master Fund Ltd., By: Phillip 09/04/2024

Meyer, its Director

/s/ Seth Fischer 09/04/2024

** 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.