FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 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 contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| affirmative defense 10b5-1(c). See Inst | | | | | | | | |
|--|------------------------------|-------|--|---|--|---------------------------------|--|--|
| 1. Name and Address Leffew James | of Reporting Person* Howard | | 2. Issuer Name and Ticker or Trading Symbol Forza X1, Inc. [FRZA] | (Check | Relationship of Reporting Person(s) to Issuer heck all applicable) | | | |
| (Last) | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/04/2023 | X | Director Officer (give title below) | 10% Owner Other (specify below) | | |
| C/O FORZA X1, | INC. | | | President & | President & CEO | | | |
| 3101 S. US-1 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Individual or Joint/Group Filing (Check Applicable Lir X Form filed by One Reporting Person | | | | |
| (Street) | | | | 11 | Form filed by More than | ŭ | | |
| FT. PIERCE | FL | 34982 | | | · · · · · · · · · · · · · · · · · · · | , | | |
| (City) | (State) | (Zip) | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| (| 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | te, Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership |
|---|--|---|---------------------------------|---|--|---------------|-------|--|---|-------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 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/Year) | 4. Transac Code (In 8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following | Form: Direct (D) | Beneficial Ownership (Instr. 4) |
|---|---|--|---|---------------------------------|---|------------------------|-----|--|--------------------|--|----------------------------------|---|--|---------------------|---------------------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Reported Transaction(s) (Instr. 4) | | |
| Stock Option (Right to Buy) | \$0.6963 | 10/04/2023 | | A | | 144,000 ⁽¹⁾ | | 11/04/2023 | 10/04/2033 | Common Stock | 144,000 | \$0 | 144,000 | D | |

Explanation of Responses:

1. These options vest pro rata monthly over 36 months.

/s/ James H. Leffew

10/05/2023

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).