FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

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* 2. Date of Event Requiring Statement (Month/Day/Ye TURNEY SHAREN J 08/05/2021 | | | | | 3. Issuer Name and Ticker or Trading Symbol <u>Academy Sports & Outdoors, Inc.</u> [ASO] | | | | | | | |
|---|--|--|---------------------|--|---|--|--------|--|-----------------------------------|----|---|--|
| (Last) (First) (Middle) C/O ACADEMY SPORTS AND OUTDOORS, INC. 1800 NORTH MASON ROAD (Street) KATY TX (City) (State) (Zip) | | | | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title below) Other (specify below) | | | below) | 5. If Amendment, Date of 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 | | | | |
| | | | Table I - I | Non-Deriv | vative S | ecurities Beneficially Ov | vned | i | | | | |
| 1. Title of Security (Instr. 4) | | | | | 2. Amount of Securities Beneficially Dwned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | |
| Common Stock | | | | | | 0 | | D | | | | |
| | | | | | | curities Beneficially Own options, convertible sect | | es) | | | | |
| Expira (Month Date | | | Expiration D | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underly Security (Instr. 4) | | Derivative | 4. Conversion or Exercise | | 5. Ownership Form: Direct (D) or Indirect (I) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
| | | | Date Exercisable | Expiration Date | Title | | | Amount or Number of Shares | Price of Derivativ Security | re | (Instr. 5) | |

Explanation of Responses:

Remarks:

Exhibit List: Exhibit 24: Power of Attorney

Gary Holland, Attorney in Fact ** Signature of Reporting Person

08/05/2021 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 5 (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.

Know all by these presents that the undersigned, does hereby make, constitute and appoint each of Rene Casares, Sarah Green, Janet Morrow and Gi

By: /s/ Sharen J. Turney Name: Sharen J. Turney Date: August 5, 2021