

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

OMB APPROVAL					
OMB Number:	3235-0104				
Estimated average	e burden				
nours per respons	e 0.5				

INITIAL STATEMENT OF 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 Type Respons	ses)											
Name and Address of Reporting Person * Wood Amy K.		Statemen	2. Date of Event Requiring Statement (Month/Day/Yes									
2790 SKYPARK	DRIVE, S	(Middle) SUITE 105	02/23/2	2022			ssuer	f Reporting Person	· /	5. If Amendment, Date Original Filed(Month/Day/Year)		
TORRANCE, CA	(Street) 90505					X_ Director Officer (give tit	ll applicable)10% OwnerOther (specify below)		6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned						wned		
1. Title of Security (Instr. 4)			В	2. Amount of Securities Beneficially Owned (Instr. 4)		d		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)		2	. Date Exercisable nd Expiration Date Month/Day/Year)		3. Title and An		•	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Dir	nership of tive ty: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		_	Date Exercisable	Expiration Date	Titla	Amount Shares	or Number of	Security	(D) or (I) (Instr.	Indirect 5)		

Reporting Owners

Depositing Owner Name /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Wood Amy K. 2790 SKYPARK DRIVE SUITE 105 TORRANCE, CA 90505	X					

Signatures

/s/ Amy K. Wood	03/01/2022
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * 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.

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.