(Street)

WOOD

DALE

IL

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

6. Individual or Joint/Group Filing

Form filed by One Reporting

(Check Applicable Line)

Person

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

2. Date of Event 3. Issuer Name and Ticker or Trading Symbol 1. Name and Address of Reporting Person* Requiring Statement POWER SOLUTIONS INTERNATIONAL, INC. [PSIX] Yu Fuzhang (Month/Day/Year) 07/25/2023 4. Relationship of Reporting Person(s) to 5. If Amendment, Date of Original Issuer Filed (Month/Day/Year) (Last) (First) (Middle) (Check all applicable) C/O 201 MITTEL DRIVE Director 10% Owner Officer (give Other (specify

title below)

(City)	(State)	(Zip)					Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of So	ecurity (Instr. 4	1)			2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned										

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		or Exercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security		5)

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ Fuzhang Yu</u> <u>07/26/2023</u>

** Signature of Reporting Person

below)

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).

60191

** 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.