FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C	. 20010	

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average	burden							
hours per respense	. 0.5							

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

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

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Name and Address of Reporting Person*     Gagnon Neil				]	2. Issuer Name and Ticker or Trading Symbol POWER SOLUTIONS INTERNATIONAL, INC. [ PSIX ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director X 10% Owner     Officer (give title below)					
(Last) (First) (Middle) 1370 AVENUE OF THE AMERICAS 24TH FLOOR			1															
(Street) NEW YORK NY 10019														Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(St	ate) (	Zip)											. 0.00				
		Table	l - Non-	Derivati	ve S	ecurit	ies A	cqui	red,	Dis	sposed o	f, or E	Benefi	cially Own	ed			
1. Title of Security (Instr. 3)		Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		n   C	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported		6. Owner Form: Di (D) or Inc (I) (Instr.	rect Ind direct Be 4) Ov	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	A	Amount	(A) or (D)	Price	Transaction (Instr. 3 and	(s) (4)			•
Common share	Stock, par	value \$0.001 pe	r 11/	/23/2022				P			15	A	\$3	461,34	14	D		
Common share	Stock, par	value \$0.001 pe	r											113,88	30	I	Pa th	Limited rtner of Family rtnership
Common share	Stock, par	value \$0.001 pe	r											21,99	4	I	Tr G Se Ll Sl	y self as ustee of agnon curities LC Profit aring an <sup>(1)</sup>
Common share	Stock, par	value \$0.001 pe	r											659,68	30	I	M G Pa G In	anaging ember as eneral rtner of agnon vestment ssociates <sup>(1)</sup>
Common Stock, par value \$0.001 per share					70,180		I	By Managing Member as General Partner of Darwin Partnership <sup>(1)</sup>										
		Та									osed of, convertib			ally Owner	d	•	•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	onversion r Exercise (Month/Day/Year) if a rice of erivative		Deemed 4. ecution Date, Tra		saction de (Instr. Securiti Acquire (A) or Dispose of (D) (Instr. 3, and 5)		er 6. Date Ex Expiration (Month/Da			cisable and	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership t (Instr. 4)
				Co	ode ,	v (	A) (D		Date Exercisal		Expiration Date	Amou or Numb of Title Share		r				

## Explanation of Responses:

<sup>1.</sup> Neil Gagnon serves as the Chief Executive Officer of Gagnon Advisors, LLC and is the managing member and principal owner of Gagnon Securities LLC, each of which provide investment management services to investment vehicles and managed accounts (collectively, the "Accounts"), and as such, has investment discretion with respect to the Accounts. Mr. Gagnon's interest in the securities reported herein is limited to the extent of his pecuniary interest in each of the Accounts, if any.

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.