FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	Washington,	D.C.	20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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* Gagnon Neil (Last) (First) (Middle)				<u>P</u> (POWER SOLUTIONS										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				L							[PSIX]		Director X 10% Owner Officer (give title below) Other (specify below)							
1370 AV 24TH FL		THE AMERICA	aS			of Earlie 2022	st Trai	nsacti	on (Mo	onth	n/Day/Year)									
(Street)					If Am	endmen	t, Date	of O	riginal	File	d (Month/D		6. Individual or Joint/Group Filing (Check Applicable Line)							
NEW YORK NY 10019													X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(Sta	ate) (Z	Zip)																	
		Table	I - Non-Deriva	tive	Se	curitie	s Ac	qui	red, I	Dis	posed o	f, or I	Benefic							
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y			Execution Date,		te,	3. Transaction Code (Instr. 8)					d (A) or r. 3, 4 and	5. Amount of Securities Beneficially Owned Follo	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Ai	mount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	n(s) I 4)			(Instr. 4)		
Common share	Stock, par	value \$0.001 per	08/29/202	22				P			722	A	\$1.86	644,76	51	I		Gene Partn Gagn Inves	ber as ral er of	
Common share	Stock, par	value \$0.001 per	:											21,00	0	I		By se Trust Gagn Secun LLC Shari Plan	ee of on rities Profit ng	
Common share	Stock, par	value \$0.001 per	:											428,92	22	D				
Common share	Stock, par	value \$0.001 per	:											109,04	1 3	I		Partn the F	imited er of amily ership	
Common Stock, par value \$0.001 per share											70,180		I		By Managing Member as General Partner of Darwin Partnership ⁽¹⁾					
		Tal	ole II - Derivati (e.g., pu	ive :	Seci call:	urities s, war	Acq rants	uire s, op	d, Di	isp s, c	osed of, converti	or Be	eneficia curities	ılly Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3A. Deemed Execution Date, if any (Month/Day/Year)		de (Instr. of Der Sec Acc (A) Disport of (I		posed D) str. 3, 4	e (M	Expiration Date (Month/Day/Year)			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. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cod	le V	(A)	(D)	Da Ex	ite ercisal	ble	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

^{1.} 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.

- * 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.