SEC Form 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-0104

hours per response:

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

	Address of Repo John Henry	0	2. Date of E Requiring S (Month/Day 03/31/202	Statement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>Expion360 Inc.</u> [xpon]				
(Last) 2025 SW I (Street) REDMON (City)	(First) DEERHOUND ID OR (State)	(Middle) AVE 97756 (Zip)			4. Relationship of Reporting Issuer (Check all applicable) X Director X X Officer (give title below) Chief Executive	 10% Owner Other (specify 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 - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock					1,546,287	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
Expira			2. Date Exerce Expiration Da (Month/Day/)	ate	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversio or Exercis	se Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Date Exercisable	Expiration Date	Title	Amount or Security Number of Shares				

Explanation of Responses:

John Yozamp

** Signature of Reporting

04/11/2022

Person

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.

FORM 3

Date

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