FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL							
ľ	OMB Number:	3235-0287						
	Estimated average burden							
	hours per response:	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

Name and Address of Reporting Person* Levinson Mitchell E.					2. Is										Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 3957 POINT EDEN WAY					ate of 15/20		st Tran	saction (Montl	h/Day/Year)		Office below	r (give title)							
(Street) HAYWARD CA 94545			_ 4. If	Amer	ndment	t, Date	of Origin	al File	ed (Month/D		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)																				
			le I - No			_			-	l, Di	-			ally Owne						
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		Disposed			Beneficia Owned F Reported	s Form: (D) or ollowing (I) (Ins		Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	V	Amount	(A) or (D)	Price	Transacti (Instr. 3 a						
Common	Stock			06/15	/15/2020				X ⁽¹⁾		5,713	-		 	713	D				
Common	Stock			06/15	/2020	\perp			X ⁽¹⁾		714	A	\$7.0	01 3,2	3,214		I	Spouse		
Common Stock		06/15	2020				X ⁽¹⁾		127	A	\$7.0	01 57	72	I		Immediate family member				
Common Stock		06/15	2020				X ⁽¹⁾	127		A	\$7.0	01 57	72	I		Immediate family member				
Common Stock		06/15	2020		X ⁽¹⁾		127	A	\$7.0	01 57	. 572			Immediate family member						
		T	able II											lly Owned						
1. Title of Derivative Security (Instr. 3) 2. Conversior or Exercise Price of Derivative Security		Date Exe (Month/Day/Year) if a		Deemed cution Date, y		uts, calls, 4. Transaction Code (Instr. 8)		5. Number 6		6, OPTIONS, C 6. Date Exercisa Expiration Date (Month/Day/Yea		Amount of		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 Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					Code	V	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amour or Numbe of Shares	er						
Warrant (right to buy)	\$7.01	06/15/2020			P ⁽¹⁾		856		06/15/20	020	06/15/2025	Common Stock	856	(1)	85	6	D			
Warrant (right to buy)	\$7.01	06/15/2020			P ⁽¹⁾		107		06/15/20	020	06/15/2025	Common Stock	107	(1)	10	7	I	Spouse		
Warrant (right to buy)	\$7.01	06/15/2020			p ⁽¹⁾		19		06/15/20	020	06/15/2025	Common Stock	19	(1)	19)	I	Immediate family member		
Warrant (right to buy)	\$7.01	06/15/2020			p(1)		19		06/15/20)20	06/15/2025	Common Stock	19	(1)	19	9	I	Immediate family member		
Warrant (right to buy)	\$7.01	06/15/2020			P ⁽¹⁾		19		06/15/20	020	06/15/2025	Common Stock	19	(1)	19)	I	Immediate family member		

Explanation of Responses:

1. The Reporting Person acquired the shares and warrants pursuant to the exercise of subscription rights in connection with the Issuer's previously announced rights offering, as disclosed in the Registration Statement on Form S-3, as amended, and certain Current Reports on Form 8-K filed by the Issuer with the SEC.

Remarks:

/s/ Sandra Gardiner, as Attorney-in-Fact

06/17/2028

** 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.	