UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

| OMB APPROVAL | | | | | |
|--------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burden | | | | | |
| nours per response | e 0.5 | | | | |

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 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. Issuer Name Plymouth Ind 3. Date of Earlies 02/14/2022 4. If Amendment 2A. Deemed Execution Date, in (Month/Day/Yea | rable I Graph (Instant) | Al REInsaction Origin Fransacde str. 8) | IT, Inc n (Month hal Filed -Deriva ction 4. (A | Month/d Security A) or D | YM] Year) Day/Year) | Acquired f (D) | Director X Office 5. Individu X Form file Form file red, Dispo | (Che or r (give title bele all or Joint/C ed by One Repe d by More than osed of, or I t of Securiti ly Owned F Transactions | CEO Group Filing One Reporting Beneficially es ollowing (s) | able) 10% Owner Dther (specify b Check Applicab Person Dwned 6. Ownership Form: | le Line) 7. Nature |
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| 4. If Amendment 2A. Deemed Execution Date, in any | Table I 3. T Coo (Insar) | Origin I - Non Fransac de str. 8) | n-Deriva | ative So. Security or Donstr. 3, | ecurities Acquisisposed of 4 and 5) | Acquired : f (D) | 5. Individu X_Form file Form file red, Dispo 5. Amoun Beneficial Reported | nal or Joint/O ed by One Repc d by More than osed of, or I t of Securiti ly Owned F Transaction | CEO Group Filingerting Person One Reporting I Beneficially (ees ollowing (s) | Check Applicab Person Dwned 6. Ownership Form: | le Line) 7. Nature of Indirect |
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| Execution Date, i | ar) Coo | de str. 8) | (A) | A) or D nstr. 3, | sisposed of 4 and 5) | f (D) | Beneficial Reported | ly Owned F Transaction | ollowing (s) | Ownership Form: | of Indirect |
| | | | | iiiouiii | | Price | | , | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
| | | A | 18 | 8,477 | A ! | \$ 0 | 83,393 | | | D | |
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| ne n I | (e.g., puts, calls, value) ned 1 | (e.g., puts, calls, warrar ned n Date, if Code Oay/Year) (Instr. 8) Deri Secu Acqu (A) o Disp of (I (Instr. 4, an | II - Derivative Securities Acquire (e.g., puts, calls, warrants, opened A. Day/Year) A Transaction Code Of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | med 4. Transaction Code Oay/Year) Day/Year) Tode (A) or Disposed of (D) (Instr. 3, 4, and 5) Contain the for the fo | med (a.g., puts, calls, warrants, options, converting to Date, if Day/Year) Day/Year) Transaction Code (Instr. 8) Day/Year) Day/Year) Contained in the form displayed on the form displayed of (D) (Instr. 3, 4, and 5) Contained in the form displayed of (D) (Day/Year) Date Exercisable I | contained in this form the form displays a contained in this form the form displays a contained of the form displays a contained in this form f | contained in this form are the form displays a current (e.g., puts, calls, warrants, options, convertible securities) med | contained in this form are not requested from displays a currently valid II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) med | contained in this form are not required to resthe form displays a currently valid OMB contained in this form are not required to resthe form displays a currently valid OMB contained in Date, if an Date, if Code Day/Year) Day/Year) Code Of Code | the form displays a currently valid OMB control number (e.g., puts, calls, warrants, options, convertible securities) med (a.g., puts, calls, warrants, options, convertible securities) fransaction (Month/Day/Year) Month/Day/Year) fransaction (Month/Day/Year) fransaction (Instr. 3) Amount of Underlying Securities (Instr. 3) Owned Following Reported Transaction (Instr. 4) fransaction (Instr. 4) Date Expiration Date (A) or Disposed of (D) (Instr. 3, 4, and 5) Date Expiration Date Title Amount or Number of N | contained in this form are not required to respond unless the form displays a currently valid OMB control number. II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) med |

| | Relationships | | | | | |
|---|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| WRIGHT DANIEL C 20 CUSTOM HOUSE STREET, 11TH FLOOR BOSTON, MA 02110 | | | CEO | | | |

Signatures

| Daniel C. Wright | 03/28/2022 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.