SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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* 2. Date of Event Requiring Statemen (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol <u>CHEETAH NET SUPPLY CHAIN SERVICE INC.</u> [CTNT]				
(Last) (First) (Midd SIJI XINGHE MIDDLE ST, CHAOYANG NORTH RD XINGHEWAN COMMUNITY LANGYUAN 2-3001 (Street) BEIJING F4 1000 (City) (State) (Zip)	;	4. Relationship of Reporting Issuer (Check all applicable) Director Officer (give title below)	g Person(s) to 10% Owne Other (spe below)	er ecify (Ch	ed (Month/Day ndividual or Jo neck Applicable Form filed Person	int/Group Filing e Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned						
1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	Form: Dire) or Indirect			
Class A Common Stock	1,500,000	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)						
1. Title of Derivative Security (Instr	4) 2. Date Exercisat Expiration Date (Month/Day/Year)	e and 3. Title and Amount of S Underlying Derivative S (Instr. 4)	ecurity Co or	onversion Exercise	cise Form: Direct (D) ve or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Ex Exercisable Dat	ration	Amount De	rice of erivative ecurity		

xplanation of Responses:

/s/ Xiao Yan

** Signature of Reporting Person

08/28/2023 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 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.