

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

OMB APPROVAL					
OMB Number:	3235-0104				
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nours per respons	se 0.5				

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

(Print or Type Respon	ises)											
1. Name and Address of Reporting Person* Brunke Karen J		2. Date of Event Requiring Statement (Month/Day/Year) 03/30/2022			3. Issuer Name and Ticker or Trading Symbol CytoDyn Inc. [CYDY]							
1111 MAIN STR	(First) LEET, SUITE	(Middle) 660	03/30/2022				Issuer	Reporting Person(s) to all applicable) all applicable) all individual applicable) below) The control of th		5. If Amendment, Date Original Filed(Month/Day/Year)		
MANGOLIUED :	(Street)				(Check a _X_Director Officer (give title below)					6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person		
VANCOUVER,	WA 98660						below)	below)		Form fil	ed by More than One Reporting Person	
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			Ве	2. Amount of Securities Beneficially Owned (Instr. 4)		ned		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative (Instr. 4)	3		. Date Exercisable nd Expiration Date Month/Day/Year)		3. Title and A Securities Un Security (Instr. 4)		mount of derlying Derivativ	Price of Derivative	Form o Derivat Securit	Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Da Ex	te ercisable	Expiration Date	Title	Amoun Shares	t or Number of	Security	(D) or I (I) (Instr. 5	Indirect 5)		

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Brunke Karen J 1111 MAIN STREET, SUITE 660 VANCOUVER, WA 98660	X					

Signatures

/s/ Antonio Migliarese, Attorney-in-Fact	04/08/2022		
Signature of Reporting Person	Date		

Explanation of Responses:

No securities are beneficially owned

- * 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.

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.