

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

OMB APPROVAL					
OMB Number:	3235-0104				
Estimated average burden					
nours per respons	e 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 Responses)									
Name and Address of Reporting Person*  Subramanian Kals			Ų.	3. Issuer Name and Ticker or Trading Symbol CarParts.com, Inc. [PRTS]					
(Last) (First) (Middle) 2050 W. 190TH STREET, SUITE 400	04/16/2022		Issuer	Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
TORRANCE, CA 90504			DirectorX_ Officer (give ti below)	X Officer (give title Other (specify		6. 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)		Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)	2. Amount of Se Beneficially Ow (Instr. 4)		sially Owned 4)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock		0		D					
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)									
(Instr. 4) and Expiration Date (Month/Day/Year) Security (Instr. 4)  Date Expiration T. J. A		Amount or Number of	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
	Exercisable Date	Titio	Shares		(Instr. 5)				

#### **Reporting Owners**

Ī		Relationships			
Reporting Owner Name / Address		Director	10% Owner	Officer	Other
	Subramanian Kals 2050 W. 190TH STREET, SUITE 400 TORRANCE, CA 90504			Chief Technology Officer	

### **Signatures**

/s/ Kals Subramanian	04/18/2022
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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.