FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB Number:	3235-0104			
Estimated average burden				
hours per response:	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

Name and Address of Reporting Person* Yu Ying Choi Alan Abel	Statement (Month/Day/Year) 10/07/2024	3. Issuer Name and Ticker or Trading Symbol Dogwood Therapeutics, Inc. [DWTX]				
(Last) (First) (Middle)		Relationship of Reporting Person(s) to Issuer (Check all applicable)	5. If Amendment, Date of Original Filed (Month/Day/Year)			
2 DAI FU STREET, TAI PO INDUSTRIAL ESTATE (Street) NEW TERRITORIES (City) (State) (Zip)		X Director 10% Owner Officer (give title Other (specify below)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)	Form: Direct (D) or	l '
		Indirect (I) (Instr. 5)	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion or Exercise (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
Date Exercisable	Expiration Date	Title	Amount or Derivative Security Number of Shares Indirect (I) (Instr. 5)			

Explanation of Responses:

Remarks

Immediately following the effective time of the transaction contemplated by the Share Exchange Agreement by and between the Issuer and Sealbond Limited, a British Virgin Islands corporation, the Reporting Person was appointed to the board of directors of the Issuer.

No securities are beneficially owned.

/s/ Yu Ying Choi Alan Abel 10/17/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).