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

Name and Address of Reporting Person* Chen Yongyuan		3. Issuer Name and Ticker or Trading Symbol ATIF Holdings Ltd [ATIF]						
(Last) (First) (Middle) C/O ATIF HOLDINGS LIMITED			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
25391 COMMERCENTRE DR., STE 200			X Director Officer (give title below)		(specify	6. Individual or Jo (Check Applicable X Form filed		
(Street) LAKE FOREST CA 92630						. 0.00	by More than One Person	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
	1. Title of Security (Instr. 4)			3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)	Form: [(D) or Ir	Direct C			
		erivative	Beneficially Owned (Instr.	Form: E (D) or II (I) (Insti	Direct Condirect r. 5)			
		erivative s, warran isable and	Seneficially Owned (Instr. l) Securities Beneficia	Form: E (D) or Ir (I) (Instr ally Own ible sec	Direct Condirect r. 5)	5. Ownership (Instr.		

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ Yongyuan Chen</u> <u>08/01/2022</u>

** Signature of Reporting

Person

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.