SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 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

1. Name and Address of Reporting Person* <u>Quandt Robert</u>			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Integrated Wellness Acquisition Corp [WELU]									
(Last) C/O INTEGIACQUISITIO 148 N MAIN (Street) FLORIDA		(Middle) LNESS	-12/08/2021	Issuer	k all applicable) Director Officer (give title below) —Chief Operating	10% Owner Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 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 Sec	curity (Instr. 4)	2. Amount of Securitie Beneficially Owned (In 4)			3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)							

(e.g			curities Beneficia options, converti	•	es)		
1. Title of Derivative Security (Instr. 4)	2. Date Exercisa and Expiration (Month/Day/Yea		on Date Securities Underlying Derivation		or Exercise	Form:	Beneficial
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	, ,

Explanation of Responses:

Remarks:

The reporting person has an indirect pecuniary interest in Class B ordinary shares of the registrant through membership interests in IWH Sponsor LP, over which the reporting person does not have voting or dispositive control.

No securities are beneficially owned.

Robert Quandt

12/08/2021

** 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.

^{*} 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).