

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

OMB APPROVAL				
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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* Tompkins Mark N.	2. Date of Event Requiring Statement (Month/Day/Year) 12/01/2020		3. Issuer Name and Ticker or Trading Symbol Parc Investments, Inc. [NONE]					
APT. 1, VIA GUIDINO 23 (Middle)			4. Relationship of Issuer		\ /	5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) LUGANO, V8 6900			(Check _X_ DirectorOfficer (give titl below)	all applicable) _X10% Own eOther (spe	cify Applicable I _X_ Form fi	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)	•		vned		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	4,750,000			D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)		Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Expirati Exercisable Date	on Title Amou	ant or Number of	Security	(D) or Indirect (I) (Instr. 5)			
Reporting Owners		·						

Reporting Owners

Depositing Owner Name /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Tompkins Mark N. APT. 1, VIA GUIDINO 23 LUGANO, V8 6900	X	X			

Signatures

/s/ Mark Tompkins	12/01/2020
**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.