

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

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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

| 1. Name and Address of Reporting Person * 2. Date of Event Statement (MM. | | | | | 3. Issuer Name and Ticker or Trading Symbol | | | | | |
|---|--|---|--|-------------------------------|---|---|---|--|--|--|
| JOHN & BARBARA KOVACH 2015 TRUST Statement (MM) 9/3/2 | | | | / | OTECHNOLO | TECHNOLOGY HOLDINGS, INC. [LIXT.OB] | | | | |
| (Last) (First) (Middle) | 4. Relat | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
| 401 PARK AVENUE Director Officer (give Officer (give) | | | X 10% Owner e below) Other (specify below) | | | | | | | |
| (Street) NEW YORK, NY 10016 | 5. If Amendment, l Original Filed (MM | | | (Y) | 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | | | | |
| | Tabl | le I - Non-I | Derivat | ive Securities Benefic | cially Owned | | | | | |
| 1.Title of Security (Instr. 4) | | | Beneficially Owned (Instr. 4) (| | 1 | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | | |
| Common Stock | | | 8000000 | | D | | | | | |
| Table II - Derivative | Securities 1 | Beneficially | y Owne | ed (e.g. , puts, calls, v | warrants, option | s, convertible sec | curities) | | | |
| (Instr. 4) | 2. Date Exercisable and Expiration Date (MM/DD/YYYY) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 4. Conversion or Exercise Price of Derivative | Form of Derivative Security: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| | Date Exercisable | - | Title | Amount or Number of Shares | of Security | Direct (D) or Indirect (I) (Instr. 5) | | | | |

Explanation of Responses:

Reporting Owners

| Teeporting 6 whers | Relationships | | | |
|-----------------------------------|---------------|-----------|---|-------|
| Reporting Owner Name / Address | Director | 10% Owner | 1 | Other |
| JOHN & BARBARA KOVACH 2015 TRUST | | | | - |
| 401 PARK AVENUE SOUTH. | | X | | |
| 10TH FLOOR | | Λ | | |
| NEW YORK, NY 10016 | | | | |
| FORMAN ERIC | | | | |
| 401 PARK AVENUE SOUTH, 10TH FLOOR | | X | | |
| NEW YORK, NY 10016 | | | | |

Signatures

| /s/ John and Barbara Kovach 2015 Trust | 9/3/2015 | | |
|--|----------|--|--|
| ** Signature of Reporting Person | Date | | |
| /s/ Eric Forman | 9/3/2015 | | |
| **Signature of Reporting Person | Date | | |

- * 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 control number.