SEC Form 4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APF	PROVAL
OMB Number:	3235-0287

Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person <sup>*</sup> Kahli Beat (Last) (First) (Middle) C/O AVALON PARK GROUP 3801 AVALON PARK EAST BLVD., SUITE 400						er Name a X Inte							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
						of Earlie: 2022	st Tr	ansactio	on (Mo	onth/E	Day/Year)		Officer (give title Other (specify below) below)							
				4.	. If Am	nendment	, Da	te of Ori	ginal	Filed	(Month/E	Day/Yea		. Individual or	r Joint/	Group Fili	ng (Cł	neck Ap	plicable	
(Street) ORLANDO FL 32828														Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person						
(City) (State) (Zip)																				
		Table	I - Non-Deriva	ativ	'e Se	curitie	s A	cquir	ed, I	Disp	osed o	of, or l	Benefic	ially Own	ed					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea					Exe if an	iy	ution Date,		3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amo	ount	(A) or (D)	Price	Transaction (Instr. 3 and	n(s) I 4)	(Instr. 4)		(instr.	<i>+</i> )	
Class A (	Class A Common Stock 10/20/2				2			Р		25	5,000	А	\$7.52	766,16	51	I		By Avalon Park International, LLC <sup>(1)</sup>		
Class A (	Class A Common Stock													5,083,839		I		By Avalon Park Group Holding AG <sup>(2)</sup>		
		Tal	ble II - Derivat (e.g., pu												d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date E: (Month/Day/Year) if	3A. Deemed Execution Date, if any (Month/Day/Year)		ansact de (Ins	ion of str. Der Sec (A) Dis of (			Expiration ve (Month/D es d				le and unt of irities orlying vative irity (Instr. d 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Form Direct or Inc		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	de V	/ (A)	([	) Dat	e ercisat		Expiratior Date	n Title	Amount or Number of Shares							
1. Name a <u>Kahli I</u>		Reporting Person*	•	<u> </u>											*					
	ALON PAR	(First) K GROUP RK EAST BLVD	(Middle) ., SUITE 400																	
(Street) ORLAN	DO	FL	32828																	
(City)		(State)	(Zip)																	
		Reporting Person <sup>*</sup> Dup Holding A	A <u>G</u>			1														
(Last) RIESBA	CHSTRAS	(First) SE 57	(Middle)																	
(Street)																				

(City) (State) (Zip) Explanation of Responses:

**V**8

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1. Beat M. Kahli is the sole manager and controlling member of Avalon Park International, LLC.

2. Beat M. Kahli is the controlling shareholder of Avalon Park Group Holding AG, formerly known as Kahli Holding AG. Kahli Holding AG changed its name to Avalon Park Group Holding AG. Jill Kahli, the wife of Mr. Kahli, is the only other shareholder of Avalon Park Group Holding AG.

Remarks:

/s/ Beat M. Kahli 10/20/2022 /s/ Beat M. Kahli, on behalf of Avalon Park Group Holding 10/20/2022 AG

\*\* 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 4 (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.