FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

						of Section 30(ii) of the investment Company Act of 1340																	
1. Name and Address of Reporting Person* Kahli Beat					2. Issuer Name and Ticker or Trading Symbol VOXX International Corp [VOXX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner									
					3. Date of Earliest Transaction (Month/Day/Year) 8/16/2022										Office below	r (give ')	title		other (s elow)	pecify			
(Street) ORLANDO FL 32828				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting									
(City)			Zip)											2	X Perso		,	u 0	о глоро	9			
		Table	I - Non-Deriva	ative	e Se	curitie	s A	cquir	ed, l	Disp	osed o	of, or	Benefi	icia	lly Owne	ed							
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye		2A. Deem Execution if any (Month/Da		on Date,		3. Transaction Code (Instr. 8)		4. Securities Acqui Disposed Of (D) (In 5)		quired (A) or (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4)		7. Natu Indired Benefi Owner (Instr.	ct cial ship				
								Code	ode V		ount	(A) or (D)	Price	Т	Transaction(s) (Instr. 3 and 4)		(,		()				
Class A C	Common Sto	ock	08/16/202	2				P		10),000	A	\$10.02)2	4,970,00	00	I	By Avalon Park Grou Holding AG ⁽¹⁾		Group ing			
Class A C	Common Ste	ock													650,00	0	I		By Avalon Park International, LLC ⁽²⁾				
		Tal	ole II - Derivat (e.g., pu												y Owned	<u> </u>							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Trai	Transaction Code (Instr.				Date E piratio	vercisable and on Date Date Day/Year)		7. Tir Amo Secu Unde Derir Secu	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Cod	de \	' (A) (C		Da Ex	te ercisal		Expiration Date		Amour or Number of Shares	er									
1. Name ar <u>Kahli F</u>		Reporting Person*											•										
	LON PAR	(First) K GROUP KK EAST BLVD	(Middle)																				
	ALON FAN	EAST BLVD	., SUITE 400																				
(Street) ORLAN	DO	FL	32828																				
(City)		(State)	(Zip)																				
		Reporting Person* oup Holding A	AG																				
(Last) RIESBA	CHSTRAS	(First) SE 57	(Middle)																				
(Street)					_																		

V8

(State)

8008

(Zip)

ZURICH

(City)

1. 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.

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

Remarks:

/s/ Beat M. Kahli 08/16/2022

/s/ Beat M. Kahli, on behalf of

Avalon Park Group Holding 08/16/2022

<u>AG</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 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.