FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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	Secti	on 30(h) o	f the	Invest	tment	Company Act	of 1940	)								
					2. Issuer Name <b>and</b> Ticker or Trading Symbol VOXX International Corp [ VOXX ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner							
(Last) (First) (Middle) C/O AVALON PARK GROUP 3801 AVALON PARK EAST BLVD., SUITE 400				10	)/19/:	2022			`	nth/Day/Year		below	,		b€	ther (spelow)				
(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  X Form filed by More than One Reporting Person						
(City) (State) (Zip)														1 0130						
		Table	I - Non-Deriva	ative	e Se	curities	Ac	quire	ed, D	isposed o	of, or	Benefi	icial	ly Owne	ed					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yes					Exec if an	Deemed cution Date y nth/Day/Yea	, [	3. Transaction Code (Instr. 8)			(D) (Inst	Acquired (A) or D) (Instr. 3, 4 and		Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							_	Code	٧	Amount	(A) or (D)	Price	Ti (li	ransaction nstr. 3 and	(s) 4)					
Class A Common Stock 10/19/202				22	2			P		25,000	A	\$7.22	2	741,161		I		By Avalon Park International, LLC <sup>(1)</sup>		
Class A Common Stock														5,083,83	,083,839		т		By Avalon Park Group Holding AG <sup>(2)</sup>	
		Tal	ble II - Derivat							sposed of				/ Owned	1					
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. Trar	nsacti le (Ins	5. Nu on of	rative rities rired r osed )	6. Date Ex Expiration (Month/Da		ercisable and Date	7. Tit Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		s. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owne Form: Direct or Ind (I) (Ins	t (D) lirect	Beneficial Ownership ct (Instr. 4)	
				Cod	le V	(A)	(D)	Date Exe	e rcisab	Expiration le Date	n Title	Amous or Number of Shares	er							
1. Name and Address of Reporting Person* <u>Kahli Beat</u>						•					'	'								
(Last) (First) (Middle) C/O AVALON PARK GROUP 3801 AVALON PARK EAST BLVD., SUITE 400																				
(Street)																				
ORLANDO		FL	32828																	
(City)		(State)	(Zip)																	
1. Name and Address of Reporting Person* <u>Avalon Park Group Holding AG</u>																				
(Last) (First) (Middle) RIESBACHSTRASSE 57																				
(Street)																				

V8

(State)

8008

(Zip)

**ZURICH** 

(City)

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 10/19/2022

/s/ Beat M. Kahli, on behalf of

Avalon Park Group Holding 10/19/2022

<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.