FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington

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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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* <u>Kahli Beat</u>					2. Issuer Name and Ticker or Trading Symbol VOXX International Corp [VOXX]							Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
	ast) (First) (Middle) /O AVALON PARK GROUP 801 AVALON PARK EAST BLVD., SUITE 400			07	3. Date of Earliest Transaction (Month/Day/Year) 07/28/2022								b	fficer (giv elow)		b	other (s elow)	ŕ	
(Street) ORLANDO FL 32828			4.	If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Y Form filed by More than One Reporting Person Y Form filed by More than One Reporting Person Y Y Form filed by More than One Reporting Person Y Y Form filed by More than One Reporting Person								
(City)	(St	ate) (Ž	Zip)																
		Table	I - Non-Deriva	ative	e Se	curities	Ac	quire	ed, C)isposed (of, or	Benef	icially O	vned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		Execution Date,		·,	3. Transaction Code (Instr. 8)				d (A) or r. 3, 4 ar	Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3						
Class A Common Stock 07/28/2022			22	2			P		10,000	A	\$9.5	1 4,84	4,840,000		,		By Avalon Park Group Holding AG ⁽¹⁾		
Class A Common Stock												650	650,000		Park		valon national,		
		Tal	ble II - Derivat											ned	<u> </u>				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	(e.g., pt 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Tran	(A) Signal		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year) es d		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price Derivat Securit (Instr. 5	ve deriv Secu Bene Own Follo Repo Tran	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		ership : t (D) direct str. 4)	Beneficial Ownership (Instr. 4)	
				Cod	le V	/ (A)	(D)	Date Exe	e rcisab	Expiration le Date	n Title	Amou or Numb of Share	er						
1. Name ar <u>Kahli F</u>		Reporting Person*						•		•	•	•		•		•			
	ALON PAR	(First) K GROUP KK EAST BLVD	(Middle)																
(Street)			.,, 50112 .00																
ORLAN	DO	FL	32828																
(City)		(State)	(Zip)																
1. Name and Address of Reporting Person* <u>Avalon Park Group Holding AG</u>																			
(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:

<u>/s/ Beat M. Kahli</u> <u>07/28/2022</u>

/s/ Beat M. Kahli, on behalf of

Avalon Park Group Holding 07/28/2022

<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.