SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							

to Sec obligat	this box if no le tion 16. Form 4 ions may conti tion 1(b).	or Form 5	STATEMEN Filed	pursuant	to Section 1	6(a) of 1	the Se	curities Excha	nae Act	of 1934	RSHIP		OMB Num Estimated hours per r	average b	3235-0287 urden 0.5
1. Name and Address of Reporting Person [*] <u>Kahli Beat</u>			or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol <u>VOXX International Corp</u> [VOXX]						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) (First) (Middle) C/O AVALON PARK GROUP			3. Date of Earliest Transaction (Month/Day/Year) 08/25/2022							Officer (give title Other (specify below) below)					
3801 AVALON PARK EAST BLVD., SUITE 400 (Street) ORLANDO FL 32828			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)	(St		Zip)												
		Table	I - Non-Deriva	tive Se	curities A	Acqui	red, I	Disposed	of, or	Benefic	ially Own	ed			
···· ···· ··· ··· ··· ··· ··· ··· ···		2. Transaction Date (Month/Day/Ye	ar) if any	Deemed :ution Date, y ith/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar 5)		d (A) or r. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported				7. Nature of Indirect Beneficial Ownership	
						v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Class A Common Stock 08/25/20			08/25/202	2		Р		10,000	A	\$10.06	5,040,0	000	I	P H	y Avalon ark Group olding G ⁽¹⁾
Class A Common Stock											650,00	00	Ι	P Iı	y Avalon ark nternationa LC ⁽²⁾
		Та	ble II - Derivati (e.g., pu					isposed of s, convert				d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution Date,		4. Transaction Code (Instr. 8) Securit Acquir (A) or Dispos of (D) Securit Acquir (A) or Dispos of (D) (Instr. and 5)		piratio	xercisable and n Date ay/Year)	Amo Secu Und Deri	tle and unt of irities erlying 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)		10. Owners Form: Direct (I or Indire (I) (Instr	Benefic D) Owners ect (Instr. 4
				Code V	′ (A) (ate kercisal	Expiration Date	n Title	Amount or Number of Shares					
1. Name ar <u>Kahli F</u>		FReporting Person	7	<u> </u>						*	*	-		-	
(Last)		(First)	(Middle)												

C/O AVALON PARK GROUP

3801 AVALON PARK EAST BLVD., SUITE 400

(Street) ORLANDO FL 32828

(Zip)

(City) (State)

1. Name and Address of Reporting Person* Avalon Park Group Holding AG

(Last)	(First)	(Middle)							
RIESBACHSTRASSE 57									
(Street)									
ZURICH	V8	8008							
			_						
(City)	(State)	(Zip)							

Explanation of Responses:

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 08/25/2022 /s/ Beat M. Kahli, on behalf of Avalon Park Group Holding 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.