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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Kahli Beat							2. Issuer Name and Ticker or Trading Symbol VOXX International Corp [VOXX]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
(Last) (First) (Middle) C/O AVALON PARK GROUP						3. Date of Earliest Transaction (Month/Day/Year) 09/28/2020											Office below	er (give /)	title		other (s elow)	pecify	
3680 AVALON PARK BLVD., SUITE 300						If Amendment, Date of Original Filed (Month/Day/Year)											Individual or	Joint/0	Group Fili	ng (Ch	neck Ap	plicable	
(Street) ORLANDO FL 32828				8												Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City) (State) (Zip)																							
		Table	1 - 1	Non-Deriva	tive	Se	ecur	ities A	cqı	uire	ed, C	ispos	ed o	of, or	Benefi	icia	ally Own	ed					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Ye	ear)	ar) if any		eemed tion Date, h/Day/Year)		3. Transaction Code (Instr. 8)		4. Secu Dispos 5)	rities ed Of	Acquire (D) (Inst	d (A) or tr. 3, 4 an	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership			
								Code		v	Amount ((A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)			
Class A Common Stock				09/28/2020				F	P		1,60	0	A	\$7.71	1	4,027,546		I		By Kahli Holding AG ⁽¹⁾			
Class A Common Stock																	288,037		I		By Avalon Park International, LLC ⁽²⁾		
		Tal	ble	II - Derivati	ive S	Sec	urit	ies Ac	qui	red	I, Di	spose	d of	, or B	enefic	ial	ly Owned	t	<u> </u>				
1. Title of	2.	5, warrants, options, convertible securit 5. Number 6. Date Exercisable and 7. Title and							es)	8. Price of	0. 11		10.		11. Nature								
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if ar	xecution Date, any		4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Dispose of (D) (Instr. 3, and 5)	Expiration (Month/Da			n Date		Amo Secu Unde Deri	Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect Beneficial Ownership (Instr. 4)	
					Code	e \	v	(A) (D		Date Exer	e rcisab		iratioi	n Title	Amour or Number of Shares	er							
1. Name ar <u>Kahli H</u>																							
(Last) (First) (Middle) C/O AVALON PARK GROUP 3680 AVALON PARK BLVD., SUITE 300																							
(Street) ORLANDO		FL		32828		_																	
(City)		(State)		(Zip)																			
1. Name and Address of Reporting Person* Kahli Holding AG																							
(Last) (First) RIESBACHSTRASSE 57			(Middle)																				
(Street)	I	V8		8008																			

Explanation of Responses:

(State)

(City)

(Zip)

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

Remarks:

 /s/Beat Kahli
 09/29/2020

 /s/ Beat M. Kahli, on behalf of Kahli Holding AG
 09/29/2020

** 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.