FORM 4

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

Washington,	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

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

1. Name and Address of Reporting Person*  Kahli Beat					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     Officer (give title Other (specify)							
	(Last) (First) (Middle) C/O AVALON PARK GROUP 3801 AVALON PARK EAST BLVD., SUITE 400					3. Date of Earliest Transaction (Month/Day/Year) 05/23/2022									v) ``		be	elow)		
(Street) ORLANDO FL 32828				4. If	If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)      Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)	(Sta	ate) (Z	Zip)																	
4 =====================================								_		ed, C				cially Own			[			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea				ear)   Execution		eemed ition Date h/Day/Yea	e, ar)	3. Transaction Code (Instr 8)		4. Securities Disposed Of 5)	f (D) (Ins	tr. 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)					
					$\dashv$			+	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and			$\dashv$	Dv. A	volon	
Class A Common Stock 05/23/2022				2	!			P		19,855	A	\$7.49	4,409,8	355	I		By Avalon Park Group Holding AG <sup>(1)</sup>			
Class A Common Stock													650,00	00	I		Park	valon national,		
		Tal	ble II -								sposed of			ally Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execut if any	3A. Deemed Execution Date,		4. Transaction Code (Instr. 8)		vative rities rired rosed ) r. 3, 4	er 6. Date Ex Expiration (Month/Da		ercisable and Date	7. Ti Amo Secu Und Deri	tle and ount of urities erlying vative urity (Instr	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owner Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	/ (A) (I		Date Exe	e rcisab	Expiratio le Date	on Title Ame								
1. Name ar <u>Kahli E</u>		Reporting Person*										·						·		
(Last) (First) (Middle) C/O AVALON PARK GROUP 3801 AVALON PARK EAST BLVD., SUITE 400																				
(Street)	DO	FL	32	2828		_														
(City)		(State)	(Zip	p)		$^{-} $														
		Reporting Person*	<u>4G</u>																	
(Last) RIESBA	CHSTRAS	(First) SE 57	(Mi	iddle)																

V8

(State)

8008

(Zip)

(Street) **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>05/24/2022</u>

/s/ Beat M. Kahli, on behalf of

Avalon Park Group Holding 05/24/2022

<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.