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VOXX Intern	ational Corp										
Form 4											
July 27, 2016	4 UNITED) STATES		ITIES Al hington,			NGE (COMMISSION		PROVAL 3235-0287	
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STATE 5. Filed pu ^s Section 17	rsuant to s (a) of the	F CHAN Section 10 Public Ut	GES IN I SECUR	BENEFI ITIES e Securiti ling Com	CIA ies E ipany	xchang Act of	NERSHIP OF ge Act of 1934, f 1935 or Sectio 40	Expires: Estimated a burden hou response	rs per	
(Print or Type R	esponses)										
1. Name and Ad LESSER PE	ddress of Reporting TER A	g Person <u>*</u>	Symbol	Name and			-	5. Relationship of Issuer	f Reporting Pers		
	(First) INTERNATIO TION, 180 MAI		3. Date of (Month/D 07/25/20	-	ansaction			X Director Officer (give below)	10%	o Owner er (specify	
(Street) 4. If Amend Filed(Month				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
HAUPPAUC	GE, NY 11788								More than One Re		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Acc	quired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	curity (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Class A Common Stock	07/25/2016			Code V P	Amount 2,000	(D) A	Price \$ 2.57	2,000	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

D Se	. 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. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
					Code V	′ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
LESSER PETER A C/O VOXX INTERNATIO 180 MARCUS BLVD.	Х							
HAUPPAUGE, NY 11788 Signatures /s/ Peter Lesser	07/26/2016							

**Signature of Reporting Person

1 ł Ś

Date

Explanation of Responses:

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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.