**VOXX International Corp** Form 4 August 29, 2016

### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB APPROVAL** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * LAVELLE PATRICK M			Symbol	2. Issuer Name and Ticker or Trading Symbol VOXX International Corp [VOXX]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of	3. Date of Earliest Transaction				(Check all applicable)					
			(Month/D	ay/Year)				_X_ Director	10%	Owner			
C/O VOXX INTERNATIONAL			08/25/2	08/25/2016					_X_ Officer (give title Other (specify below)				
CORPORA BLVD	TION, 2351 J	LAWSON	N					/	sident and CEO				
	(Street)	4. If Ame	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line)					
		Filed(Mor	Filed(Month/Day/Year)										
ORLANDO	), FL 32824							_X_ Form filed by Form filed by Person	One Reporting Pe More than One Re				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed o	of, or Beneficial	ly Owned			
1.Title of	2. Transaction	Date 2A. D	eemed	3. 4. Securities Acquired			5. Amount of	6. Ownership	7. Nature of				
Security (Instr. 3)	(Month/Day/Yo		tion Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			Securities Beneficially	Indirect Beneficial					
(IIIstr. 5)		any (Mont	h/Day/Year)					Owned Following	(D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)			
						(A) or		Reported Transaction(s) (Instr. 3 and 4)					
				Code V	Amount	(D)	Price	(Ilisti. 5 alid 4)					
Class A							\$						
Common Stock	08/25/2016			P <u>(1)</u>	16,154	A	3.04	55,299	D				

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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1. 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.  onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title a Amount of Underlying Securities (Instr. 3 a	of ng s	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)  (A) (D)	Date Exercisable	Expiration Date	or Title Nu of	umber		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
LAVELLE PATRICK M C/O VOXX INTERNATIONAL CORPORATION 2351 J LAWSON BLVD ORLANDO, FL 32824	X		President and CEO			

# **Signatures**

/s/ Patrick M.
Lavelle

\*\*Signature of Reporting Person

08/26/2016

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).

This transaction was executed pursuant to a 10b-5 trading plan entered into on July 25, 2016. It was executed in multiple trades at prices ranging from \$2.95 to \$3.10 per share. The price reported above reflects the weighted average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, Voxx or a shareholder of Voxx full information regarding the number of shares and prices at which the transaction was effected.

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.

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