FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response	: 0.5							

	tion 1(b).	nuc. occ		Filed	pursua or Se	ant to S ection 3	Section 30(h) o	16(a) f the Ir	of the S	Securit ent Co	ies Exchang mpany Act o	e Act of f 1940	1934			nours	perre	esponse:	0.5
Name and Address of Reporting Person* Dungan Jefferson					2. Issuer Name and Ticker or Trading Symbol Snap One Holdings Corp. [SNPO]								5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director 10% Owne Officer (give title Other (spec					wner	
(Last) (First) (Middle) C/O SNAP ONE HOLDINGS CORP. 1800 CONTINENTAL BLVD., SUITE 200					3. Date of Earliest Transaction (Month/Day/Year) 05/24/2022									X Office (give title Office (specify below) Chief Operations Officer					
(Street) CHARL (City)	OTTE NO	-	8273 Zip)		4. If <i>I</i>	Amend	ment,	Date o	f Origina	al File	d (Month/Da	y/Year)		i. Indiv ine) X	Form	filed by On	e Rep	ng (Check A porting Pers an One Rep	on
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				red (A) o str. 3, 4 a	4 and Securitie Beneficia		ies cially Following	Forr (D)	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) o (D)	r Price	,	Transa	ction(s) 3 and 4)			(111041. 4)
Common Stock 05/24/2					2022				p(1)		10,000	A	\$10	0.25	10,000			I	By 401(k) Plan
		Tal	ble II -								osed of, convertib				Owned	t			
1. Title of Derivative Security (Instr. 3)	/e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities ired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Expiration Date			Amount of Securities S		Deri Sec	8. Price of Derivative Security (Instr. 5) 8. Nu deriv Secu Bene Own Follic Rep Tran (Inst		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. Purchased through Reporting Person's self-directed 401(k) account.

Remarks:

/s/ JD Ellis, Attorney-in-fact for Jefferson Dungan

05/25/2022

** 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.