### Edgar Filing: Ewing D Eugene - Form 4

Form 4 May 18, 20	•											
FORM /									OMB APPROVAL			
	UNIII	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287		
Check the check	nger								Expires:	January 31, 2005		
subject t Section Form 4	to SIAI 16. or			SECUI	ERSHIP OF	Estimated average burden hours per response 0						
Form 5 obligation may corn See Insta 1(b).	ons Section	17(a) of the	Public U	mpan	U	Act of 1934, 1935 or Section )						
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Ewing D Eugene			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
	Compa [CODI]	ss Divers ]	ified Ho	lding	S	(Check all applicable)						
(Last) 301 RIVER	3. Date of Earliest Transaction (Month/Day/Year) 05/16/2018					below)	itle X_Other Other Delow)	Owner er (specify				
	SECOND FL	OOR	03/10/2	2018				See	Remark (a)			
	(Street)			endment, D nth/Day/Yea	-	al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
WESTPOR	RT, CT 06880						:	Form filed by Mo Person	ore than One Rej	porting		
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deen Execution any (Month/D			• •				(D)	<ul> <li>S. Amount of Securities Beneficially Owned Following Reported</li> </ul>	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)			
Common Shares $(1)$	05/16/2018			Р	1,267	А	\$ 15.5301	47,000	D			
Common Shares $(1)$	05/17/2018			Р	2,000	А	\$ 15.525 (2)	17,000	Ι	By Spouse		

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.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr	
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

# **Reporting Owners**

 

 Reporting Owner Name / Address
 Relationships

 Director
 10% Owner
 Officer
 Other

 Ewing D Eugene 301 RIVERSIDE AVENUE SECOND FLOOR WESTPORT, CT 06880
 See Remark (a)
 See Remark (a)

 Signatures s/ D. Eugene Ewing, by Carrie W. Ryan and Ryan J. Faulkingham as attorneys-in-fact
 Sof 18/2018

\*\*Signature of Reporting Person

## **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).
- (1) Each Common Share represents one undivided beneficial interest in Compass Diversified Holdings (the "Trust") property and corresponds to one trust common interest of Compass Group Diversified Holdings LLC held by the Trust.

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from
(2) \$15.52 to \$15.545, inclusive. Full information regarding the number of shares purchased at each separate price will be provided upon request by the SEC staff, the issuer, or any security holder of the issuer.

#### **Remarks:**

(a) Mr. Ewing is a Director of Compass Group Diversified Holdings LLC, Sponsor of the Trust.

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.

Date