FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  DAY C SEAN				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Compass Diversified Holdings [ CODI ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title V Other (specify								
(Last) (First) (Middle) SIXTY ONE WILTON ROAD SECOND FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 12/30/2009								below)  See Remarks (a)								
(Street) WESTPO			06880 Zip)		4. If <i>i</i>	Amen	dment,	Date of	of Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			2. Transacti Date (Month/Day			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)		r and	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o	Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Shares <sup>(1)</sup>				12/30/20	009				J <sup>(2)</sup>		216,000	D	\$0	0.00	1,0	696		D		
Shares <sup>(1)</sup>				12/30/20	009				J <sup>(2)</sup>		216,000	A	\$0	).00	216	5,000		I	By Grantor Retained Annuity Trust <sup>(3)</sup>	
Shares <sup>(1)</sup>															7,0	000		I	By Irrevocable Trust <sup>(4)</sup>	
Shares <sup>(1)</sup>															298	3,758		I	By Grantor Retained Annuity Trust <sup>(5)</sup>	
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 of Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3A. Deemed Execution Date (Month/Day/Year)  (Month/Day/Year)		on Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exerci Expiration Dat (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Number of Shares	er						

## Explanation of Responses:

- 1. Each Share represents one undivided beneficial interest in Compass Diversified Holdings (the "Trust") property and corresponds to one trust interest of Compass Group Diversified Holdings LLC held by the
- 2. The securities were transferred by the Reporting Person from C. Sean Day, individually, to the Christopher Sean Day 2009 GRAT #4.
- 3. Shares beneficially owned by the Reporting Person through the Christopher Sean Day 2009 GRAT #4.
- 4. Shares beneficially owned by the Reporting Person through the Day Family 2007 Irrevocable Trust.
- 5. Shares beneficially owned by the Reporting Person through the Christopher Sean Day 2009 GRAT #1.

## Remarks:

(a) Mr. Day is Chairman of the Board of Directors of Compass Group Diversified Holdings LLC, Sponsor of the Trust.

/s/ Sean Day, by James J. Bottiglieri as attorney-in-fact

12/31/2009

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.