FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHAN	NGES IN BE	NEFICIAL (OWNERSHIP

l	OMB APPR	OVAL
	OMB Number:	3235-0287
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ı	hours par raspansa:	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					<u>C</u>	2. Issuer Name and 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 below) Very contact the person of the pers						
(Last) (First) (Middle) 301 RIVERSIDE AVENUE SECOND FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 01/03/2019									See Remarks (a)						
(Street) WESTPORT CT 06880				4.	4. If Amendment, Date 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							
(City)	(St	ate) (Zip)																		
		Tabl	e I -	Non-Deriv	/ativ	e Sec	uritie	s Ac	cqu	uired,	Di	sposed	of, or	Benefici	ally	/ Owne	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		, T	3. Transaction Code (Instr. 8)			Securities A sposed Of (i (A) or : 3, 4 and 5)	Benefic		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							c	Code	V	Ar	mount	(A) or (D)	Price	Transac (Instr. 3		tion(s) and 4)	on(s) nd 4)		,		
Common Shares ⁽¹⁾ 01/03/2019				19				P			8,972	A	\$13.3032	\$13.3032 ⁽²⁾		453,877		D			
Common Shares ⁽¹⁾																156,563			I	By Irrevocable Trust ⁽³⁾	
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)	perivative Conversion Date Execution Date, Codecurity or Exercise (Month/Day/Year) if any Codecod				Trans Code	ansaction of Derivativ Securitie Acquired (A) or Dispose of (D) (Instr. 3, 4 and 5)		ative rities ired sed	Expiration (Month/Dates		n Da			le and unt of rities rlying active rity (Instr. 3	De Se	Price of Privative Ecurity Str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)		ate xercisat	ole	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. Each Common Share represents one undivided beneficial interest in Compass Diversified Holdings (the "Trust") property and corresponds to one underlying trust common interest of Compass Group Diversified Holdings LLC (the "Company") held by the Trust.
- 2. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$12.85 to \$13.47, 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.
- $3. \ Shares \ beneficially \ owned \ by \ the \ Reporting \ Person \ through \ the \ Day \ Family \ 2007 \ Irrevocable \ Trust.$

Remarks

(a) Mr. Day is Chairman of the Board of Directors of the Company, Sponsor of the Trust.

/s/ Sean Day, by Carrie W.

Ryan and Ryan J. Faulkingham 01/07/2019
as attorneys-in-fact

** 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.