FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Mahon Nancy				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 (chick title) Other (capacity)						
(Last) 301 RIV	(Fir	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/28/2024							Officer (give title X Other (specify below) See Remark (a)						
(Street) WESTPO	ORT CT	0	6880	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							, I	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					on
(City)	(St		Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - Non-Deriv	ative	Secui	rities	Acc	quire	ed, Di	sposed o	f, or	Benefici	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			rear) E	Execution Da		n Date, Ti		3. Transaction Code (Instr. 8) 4. Securities Disposed Of				d 5) Secu Bene		icially d Following		: Direct or I r I ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						С	ode	V A	Amount	(A) or (D)	Price	Tran		saction(s) r. 3 and 4)		. 4,	(11150.4)	
Common Shares ⁽¹⁾ 05/28/202			24	.4			P		7,436	A	\$22.4107(2)		10,523			D		
	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	Transaction Code (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date			Exp	Expiration Date (Month/Day/Year) Set Un Det Set			mount of ecurities		rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	/ E	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code				e ercisable	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 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 \$22.25 to \$22.57, 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) Ms. Mahon is a Director of Compass Group Diversified Holdings LLC, the Sponsor of the Trust.

/s/ Nancy Mahon, by Carrie W. Ryan and Ryan J. Faulkingham as attorneys-in-

05/29/2024

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.