FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
OMB Number: 3235-0104								
Estimated average burden								
hours per response:								

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

SABO ELIAS Requiring (Month/Da		2. Date of Event Requiring Stater Month/Day/Yea 09/01/2007	nent	3. Issuer Name and Ticker or Trading Symbol Compass Diversified Trust [CODI]							
(Last) SIXTY ONE	(First) WILTON ROA	(Middle)			Relationship of Reporting Pers (Check all applicable) Director				5. If Amendment, Date of Original Filed (Month/Day/Year)		
SECOND FLOOR					Officer (give title below) Other (specify below)			6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) WESTPORT	СТ	06880			See Remarks	(a)			led b	y One Reporting Person y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Shares ⁽¹⁾				64,000	I	hrough Phai	ough Pharos I LLC ⁽²⁾				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4) Conve		4. Conversi or Exerci Price of	rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiratio Date	on Title	Amount or Number of Shares	Derivativ Security		ćt		

Explanation of Responses:

- 1. Each share represents one undivided beneficial interest in the Trust property and corresponds to one trust interest of Compass Group Diversified Holdings LLC held by the Trust.
- $2. Amounts \ with \ respect to \ Mr. \ Sabo \ reflect \ his \ beneficial \ ownership \ of \ Shares \ through \ his \ pecuniary \ interest \ in \ Pharos \ I \ LLC.$

Remarks:

 $\hbox{ (a) Mr. Sabo is an Assistant Secretary of Compass Group Diversified Holdings LLC, Sponsor of the Trust. } \\$

<u>/s/ Elias J. Sabo</u> <u>09/10/2007</u>

** 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 5 (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.