

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *															5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
AXELROD	NORMA	N			Fl	oor	& De	cor Ho	lding	gs, l	nc.	[FN	D]					
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)								X Director Officer (gi	X _ Director 10% Owner Officer (give title below) Other (specify below)				
C/O FLOOF INC., 2233 L				IGS,				11	/2/20	018								
,		eet)			4. 1	f An	nendme	nt, Date	Origi	nal F	iled ((MM/DI	D/YY	YY) 6. Individual	or Joint/G	roup Filing	Check Appl	icable Line)
SMYRNA, GA 30080 (City) (State) (Zip)													X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(0	<u>, (51</u>	utcy		I - No	n-Der	ivati	ve Seci	ırities A	cquir	ed, I	Dispo	osed o	f, or	Beneficially Own	ed			
			s. Date			3. Trans. (Instr. 8)			4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
								Code	V	Am	ount	(A) or (D)	Pri	се			or Indirect (I) (Instr. 4)	(Instr. 4)
Class A common sto	ock, par valu	e \$0.001		11/2/2	2018			A		2033	<u>(1)</u>	A	\$0		5128		D	
Class A common sto	ock, par valu	e \$0.001													347080		I	By Alison K. Axelrod 2012 Family Trust, of which Mr. Axelrod is the trustee.
Class A common sto	ock, par valu	e \$0.001													260961		I	By AS SKIP LLC, of which Mr. Axelrod is the managing member.
	Tab	ole II - D	erivative	Secur	ities l	Bene	ficially	Owned	(e.g.	, put	s, ca	ılls, wa	ırraı	nts, options, conv	ertible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Dee Execution Date, if	on (I	Trans. nstr. 8)	Acquire Dispose		e Securitie (A) or		Expiration Date Securitie Derivativ			Secur Deriv	le and Amount of ities Underlying ative Security . 3 and 4)	Underlying Security d 4) Derivative Security (Instr. 5) Derivative Security (Instr. 5) Benefici Owned		Form of Derivative Security:	Beneficial
	Security				Code	V	(A)	(D)	Date		Exp Dat	piration te	Title	Amount or Number of Shares		Reported or	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) Represents a grant of restricted stock. The restrictions with respect to the restricted stock lapse on November 2, 2020.

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
AXELROD NORMAN						
C/O FLOOR & DECOR HOLDINGS, INC.	X					
2233 LAKE PARK DRIVE	Λ					
SMYRNA, GA 30080						

Signatures

** 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 control number.