

☐ 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

1. Name and Address of Reporting Person *				2.]	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
TISHMAN S	STEVEN			A	eush	net H	oldings	Co	rp. [GOLF]						
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)							X Director	X_ Director10% Owner Officer (give title below) Other (specify below)				
C/O ACUSH	NET HO	I DINC	'C				3/24	1/2(123			omeer (gr	ve title below		ier (speerry e	ciow)	
C/O ACUSH CORP.,, 333	_						3/2-	T/ 4 ()23								
COKI.,, 333	(Stree		L I	4 1	f An	andma	nt, Date O	riair	ol Eile	d anyo	D/3/3/3	(Y) 6. Individual	or Ioint/C	roun Eiling	(Cl1- A1	: - 1.1 - T : \	
	(500)			4. 1	ПАП	iciidilici	n, Date O	ngn	iai i'iic	u (MM/D	D/III	o. marviduar	or joint/O	roup rining	Спеск Аррі	icable Line)	
FAIRHAVEN, MA 02719													X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)				Ru	Rule 10b5-1(c) Transaction Indication												
					☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan												
				tha	t is ii	ntended	to satisfy	the a	affirma	tive defe	ense o	conditions of Rule	10b5-1(c)	. See Instruc	tion 10.		
			Table I - N	Non-Der	ivati	ve Secu	rities Acq	quir	ed, Dis	sposed o	f, or	Beneficially Own	ed				
1. Title of Security Instr. 3) 2. Trans. Da			ans. Date	Exec	Deemed ution if any	3. Trans. Co. (Instr. 8)	de	4. Securities Acquired (a or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securi Following Reported (Instr. 3 and 4)		es Beneficially Owned ransaction(s)		7. Nature of Indirect Beneficial Ownership			
							Code	V	Amour	(A) or (D)	Pric	e			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock 3/24/202				24/2023			$\mathbf{A}^{(\underline{1})}$		93	A	\$49.4	16	32036		D		
	Tab	le II - Der	ivative Se	curities	Bene	eficially	Owned (a	e.g.,	puts,	calls, wa	rran	ts, options, conve	rtible secu	ırities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	on (Instr. 8)		5. Numb Derivativ Acquired Disposed (Instr. 3,	re Securities (A) or of (D)	6. Date Exercisable and Expiration Date			Secur Deriv	le and Amount of ities Underlying ative Security 3 and 4)	derlying Derivative security Security		Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		

Explanation of Responses:

(1) Represents dividend equivalent rights in connection with the Issuer's quarterly dividend and accrued to the Reporting Person on restricted stock units deferred under the Issuer's deferred compensation plan.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
TISHMAN STEVEN							
C/O ACUSHNET HOLDINGS CORP.	v						
333 BRIDGE STREET	Λ						
FAIRHAVEN, MA 02719							

Signatures

/s/ Chad M. Van Ess, as attorney-in-fact 3/28/2023

**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.