FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	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 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* Sansom Steven W.					2. Issuer Name and Ticker or Trading Symbol SPORTSMAN'S WAREHOUSE HOLDINGS, INC. [SPWH]									all appl	,	ng Perso	n(s) to Is 10% Over (s	wner		
(Last) (First) (Middle) C/O SPORTSMAN'S WAREHOUSE HOLDINGS.					3. Date of Earliest Transaction (Month/Day/Year) 10/12/2023									below			below)	specify		
INC. 1475 WEST 9000 SOUTH SUITE A					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) WEST JORDAI	N UT		84088			Rule 10b5-1(c) Transaction Indication									Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)							saction was m ions of Rule 10					ıction or writt	en plan tl	nat is inte	nded to		
		Table	I - No	n-Deriva	tive S	Secui	ities Ac	quired	l, Dis	posed of	, or B	enefic	ially	Own	ed					
Date			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		action (Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securi Benefi Owned		ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price			ed ction(s) 3 and 4)			(Instr. 4)			
Common Stock 10/				10/12/2	/2023					20,000	A	\$4.59	5915 80,000(1)(2)		000(1)(2)	I		See footnote 1.		
Common Stock 10/				10/12/2	/2023					10,000	A	\$4.59	998 10,		,000 ⁽³⁾	I		See footnote 3.		
Common	Stock												2		,111 ⁽²⁾	Γ)			
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)	Title of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year)		emed tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerc	cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Ov Fo Dii or (I)	vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
						v	(A) (D)	Date Exerci	sable	Expiration Date	Amou or Numb of Title Share									

Explanation of Responses:

- 1. Represents shares of the Issuer's common stock held by Sansom Holdings, LLC. The Reporting Person is the managing member of and owns a 100% membership interest in Sansom Holdings, LLC.
- 2. The Reporting Person filed Form 4s on September 28, 2023 and October 2, 2023 reporting purchases of an aggregate of 60,000 shares of the Issuer's common stock that inadvertently reported such shares as owned directly by the Reporting Person, when such shares were in fact owned indirectly by the Reporting Person through Sansom Holdings, LLC. The Reporting Person is the managing member of and owns a 100% membership interest in Sansom Holdings, LLC.
- 3. Represents shares of the Issuer's common stock held by the Reporting Person's spouse.

/s/ Jeff White, Attorney-in-

10/16/2023

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.