FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

wasnington,	D.C.	20549	

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-028							
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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*  GOODKIND IAN						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Jamf Holding Corp. [ JAMF ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify				
	1F HOLDII	NG CORP.	(Middle)	•		3. Date of Earliest Transaction (Month/Day/Year) 04/05/2021									below) below)  Chief Accounting Officer				,
100 WASHINGTON AVE. S. SUITE 1100						4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)													
(Street) MINNEAPOLIS MN 55401														X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)															Perso	Person			
		Tab	le I - I	Non-Deriv	/ative	e Sec	urit	ies A	cquire	d, D	isposed (	of, or B	enefic	ially	Owne	t			
Date		2. Transacti Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securities Transaction Disposed Of Code (Instr. 8)					Benefic Owned		es ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Transac	ported insaction(s) str. 3 and 4)			(Instr. 4)
Common Stock 04/05/20				021	21		M		6,645	A	\$8.2	.21		10,491		D			
Common	Common Stock 04/05/202			021	.1		S <sup>(1)</sup>		6,645	D \$36.5		5917 <sup>(2)</sup> 3,		,846		D			
		T	able								sposed of , converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	tion Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion D		7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner Form Direct or Ind (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	le V (A)		(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					
Stock Option (Right to Buy)	\$8.21	04/05/2021			M			6,645	(3)		11/17/2029	Common Stock	6,64	15	\$0.00	73,105	5	D	

## **Explanation of Responses:**

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 13, 2020.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.02 to \$37.36, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote 2 to this Form 4.
- 3. These options were granted on November 18, 2019, and vest ratably on an annual basis over the following four-year period thereafter, subject to continued service.

## Remarks:

/s/ Jeff Lendino, as attorney-infact for Ian Goodkind 04/07/2021

\*\* 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.