FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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

4.11					1						onipariy Act	01 10 1		Dala	tionchi	p of Reporti	na Do	reon(e) to b	esuer
1. Name and Address of Reporting Person* GOODKIND IAN					2. Issuer Name and Ticker or Trading Symbol Jamf Holding Corp. [JAMF]									all app Direc	blicable) tor	ng re	10% Ov	vner	
(Last) (First) (Middle) C/O JAMF HOLDING CORP.					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023								X	belov	,	itle Other below inancial Officer		specify	
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 Person					- 1
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication														
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	l - Non-E	Derivat	tive Se	ecui	rities	Acc	quire	d, Di	sposed c	of, or	Benefic	ially	O wr	ned			
Date			nsaction	Exe	2A. Deem Execution if any (Month/D		, Tr Co	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			ınd 5) Secเ		icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							c		ode	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				
Common Stock 06/01/2023)1/2023	3				S		11,612	D	\$17.604	49 ⁽¹⁾	16	167,871		D	
	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)	or Exercise Price of Derivative Security Or Exercise Price of Derivative Security Or Exercise Price of (Month/Day/Year) 1 ff any (Month/Day/Year) 2			Num of Deriv Secu Acqu (A) o Dispo	vative crities cired r osed) r. 3, 4	Expi	ate Exei iration I nth/Day		Amo Secu Undo Deriv Secu	tle and unt of urities erlying vative urity r. 3 and 4)	Deri Sec	rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	le V (A) (D)		Date Exercisable		Expiration Date		Amount or Number of Shares							

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$17.17 to \$18.03, 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 1 to this Form 4.

Remarks:

/s/ Jeff Lendino, as attorneyin-fact for Ian Goodkind

06/05/2023

** 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 Number.