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

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Name and Address of Reporting Person* WUDI JASON					2. Issuer Name and Ticker or Trading Symbol Jamf Holding Corp. [JAMF]								Relationship of Reporting Person(s) to Issuer (Check all applicable) 100/ Occupants 100/ Occupants						
														Direc			10% Ov		
				3. Da	3. Date of Earliest Transaction (Month/Day/Year)							X	Officer (give title below)			Other (s below)	specity		
(Last) (First) (Middle) C/O JAMF HOLDING CORP.					06/05/2023							Chief Strategist							
100 WASHINGTON AVE. S. SUITE 1100			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)								
				1									X Form filed by One Reporting Person						
(Street) MINNEAPOLIS MN 55401												Form filed by More than One Reporting Person					orting		
(City) (State) (Zip)				Rul	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	I - Non-Deriva	ative S	ecu	rities	Acc	uire	d, Di	sposed o	f, or	Benefic	ially	Owr	ned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if any (Month/Day/Yea		3. Transaction Code (Instr. 3)		tion [4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Secu Bene Owne Follo		ficially d ving	Form (D) o	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						С		ode	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)					
Common Stock 06/05/2023			3			S		30,738	D	\$17.981	.9814 ⁽¹⁾		357,599		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (ransaction Number ode (Instr. of			6. Date Exercisable and Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (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	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	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 \$17.65 to \$18.22, 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 Jason Wudi

06/06/2023

** 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.