Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See 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

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

| | | | 01 00 | | vestment oon | | | | | | | |
|--|---------|----------|-------|---|----------------|-----------------------------------|---|----------------------------|-----------------|---------------|--|--|
| 1. Name and Address of Reporting Person* | | | | uer Name and Tick terCraft Boat | 0 | Symbol 5, <u>Inc.</u> [MCFT] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| <u>Campion Donald C</u> | | | | | 0 | <u>,</u> [| X | Director | 10% C | Dwner | | |
| (Last) 100 CHEROF | (First) | (Middle) | | e of Earliest Transa 7/2021 | action (Month/ | Day/Year) | | Officer (give title below) | Other below | (specify) | | |
| | | | | mendment, Date of | Original Filed | (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | | | Line) | | | | | |
| VONORE | TN | 37855 | | | | | X | Form filed by On | e Reporting Per | son | | |
| | | | | | | | | Form filed by Mo Person | re than One Re | porting | | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| | | | | | | 4. Securities Acquired (A | | 5. Amount of | 6. Ownership | 7. Nature | | |

| | Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transa Code (8) | | 5) | (D) (Instr | . 3, 4 and | Securities Beneficially Owned Following Reported | (D) or Indirect (I) (Instr. 4) | of Indirect Beneficial Ownership (Instr. 4) |
|--------------|--------------------------|---|------------------------|---|----------------------|---------------|-------------------|---|-----------------------------------|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150. 4) |
| Common Stock | 07/27/2021 | | A | | 2,881 ⁽¹⁾ | A | \$ <mark>0</mark> | 22,800 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | (3 -, P , P , P , P , | | | | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|---|-----|--------------------------|--------------------|-------|---|--|--|--|--|
| 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) | 4. Transa Code (8) | | 5. Number of Derivative Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | xpiration Date Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. On July 27, 2021, the reporting person was granted 2,881 shares of Restricted Stock pursuant to MCBC Holdings, Inc.'s 2015 Incentive Award Plan. The Restricted Stock will vest on June 30, 2022.

<u>/s/ Timothy M. Oxley, by</u> power of attorney

07/28/2021

** 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.