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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

| to Sect obligat | this box if no lo ion 16. Form 4 ions may contir | or Form 5 | STA | | | | | | | | | | RSHII | E | OMB Numl Estimated a nours per r | average bur | 3235-0287 den 0.5 | | | |
|--|--|-------------|--|-------|---|--|----------------------------|-----------------|-----------------|--|--|---|---|--|--|----------------|------------------------------------|--|--|--|
| Instruc | tion 1(b). | | | Filed | pursu or S | ection 3 | ection 16(a 0(h) of the | nvestr | secui nent C | ities Exchang ompany Act c | of 1940 | 1934 | | | | | | | | |
| 1. Name and Address of Reporting Person [*] AISQUITH ANTHONY M | | | | | | 2. Issuer Name and Ticker or Trading Symbol OneWater Marine Inc. [ONEW] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| | | | | | | | | | | | | | XC | irector | | 10% (| Owner | | | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | Officer (give elow) | title | Other below | (specify /) | | | |
| 6275 LANIER ISLANDS PARKWAY | | | | | | 02/07/2023 | | | | | | | | Chief Operating Officer | | | | | | |
| (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| BUFOR | D GA | A 3 | 0518 | | | | | | | | | | X Form filed by One Reporting Person | | | | | | | |
| (City) | (Sta | ate) (Z | Zip) | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) Date (Month/Day/ | | | | | Execution Date, | | ion Date, | Code (Instr. 5) | | | d (A) or r. 3, 4 and | and Securities Beneficially Owned Followi | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | Ownership | | | | |
| | | | | | Code | v | Amount | (A) or (D) | Price | Trans | Reported Transaction(s) (Instr. 3 and 4) | | | Instr. 4) | | | | | | |
| Class A c | 02/07/2023 | | | | F ⁽¹⁾ | | 1,487 | D | \$29.10 | 5 2 | 251,969 | |) | | | | | | | |
| Class A common stock, par value \$0.01 | | | | | | | | | | | | | 5 | 52,541 | | I 1 | By family imited partnership | | | |
| | | Tal | ble II | | | | | | | oosed of, convertib | | | | ned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date Price of Derivative Security 3A. Deemed Execute (Month/Day/Year) 3A. Deemed Date (Month/Day/Year) 3A. Deemed Execution D if any (Month/Day | | ution Date, | 4. Transaction Code (Instr.) 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed | Expiration D (Month/Day/ | | Date Amount of | | nt of ties lying tive ty (Instr. | Derivat Securit | 8. Price of 9. Numb Derivative derivativ Security (Instr. 5) Benefici Owned Followin Reported | | 10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | t (Instr. 4) | | | | | |

(A) or Disposed of (D) (Instr. 3, 4 and 5) Amount or Number Date Exercisable Expiration Date of Shares v (A) (D) Title Code

Explanation of Responses:

1. Represents shares withheld to cover tax withholding obligations in connection with the vesting of previously reported restricted stock units.

/s/ Jack Ezzell, Authorized **Signatory**

02/09/2023

Transaction(s) (Instr. 4)

** 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.