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 |
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| STATEMENT OF CHA | NGES IN BENEFICIA | L OWNERSHIP |
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| OMB APPROVAL | | | | | | | | |
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| hours per response: | 0.5 | | | | | | | |

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

| Name and Address of Reporting Person' EZZELL JACK P | | | | | OneWater Marine Inc. [ONEW] | | | | | | | | | (Chec | k all app Direc | licable) tor | ng Per | g Person(s) to Issuer 10% Owner Other (specify | |
|---|---------------------------|--------|---------------------------------|-----------------|---|--|---|-------------------------|--|--------|--------------------|--|------------------------------------|---|---|--|--|--|--|
| (Last) 6275 LA | (Fir NIER ISL <i>A</i> | st) (I | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 12/01/2022 | | | | | | | | | X | belov | | | | specify |
| (Street) BUFORI | | | 0518 Zip) | | 4. If <i>I</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) X | Form Form | al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson | | | |
| (Oity) | (00 | , , | | n-Deriva | tive S | Secu | rities | Acq | juired, | , Dis | posed of | , or E | Benef | icially | / Own | ed | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date, | | | | Disposed C | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | 5. Amo Securit Benefic Owned Report | ies cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | Code | v | Amount | (A) (D) | or Pri | Transa | | ction(s) 3 and 4) | | | (Instr. 4) | | | |
| Class A common stock, par value \$0.01 12/01 | | | | 12/01/2 | 2022 | 022 | | A ⁽¹⁾ | | 14,922 | A | | \$ <mark>0</mark> | 111,771 | | | D | | |
| Class A common stock, par value \$0.01 12/01/2 | | | | :022 | | F ⁽²⁾ | | 2,487 | 487 D \$ | | 32.37 | .37 109,284 | | | D | | | | |
| | | Tal | ble II - | | | | | | | • | osed of, convertib | | | • | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) | | | | ion Date, | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (In | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Own Forn Direc or In (I) (Ir | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amou or Numb of Shares | er | | | | | |

Explanation of Responses:

- 1. Award of restricted stock units pursuant to the OneWater Marine Inc. 2020 Omnibus Incentive Plan that were previously subject to performance-based criteria. The award vests in three equal installments on September 30, 2022, September 30, 2023 and September 30, 2024, subject to continued employment through the applicable vesting date.
- 2. Represents shares withheld to cover tax withholding obligations in connection with the vesting of the restricted stock units reported on this form.

/s/ Jack Ezzell

12/05/2022

** Signature of Reporting Person

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.