| SEC For | | | | | | | | | | | | | | | | | | | |
|---|---|--|---|---|--|--|--|---|----------------------|------------------------------------|---|---------------------------|--|---|---|---------------------------------------|--|---|--|
| | FORM | 4 | UNITED STATES SECURITIES AND EXCHANGE CON Washington, D.C. 20549 | | | | | | | | | | | | | | | VAL | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | | ed purs | A pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | OMB Number: Estimated averag hours per respons | | | 3235-0287 en 0.5 | |
| 1. Name and Address of Reporting Person [*] Wolfe Andrew | | | | | | 2. Issuer Name and Ticker or Trading Symbol <u>Turtle Beach Corp</u> [HEAR] | | | | | | | | | 5. Relationship of Reporting (Check all applicable) X Director | | | suer wner | |
| (Last) (First) (Middle) C/O TURTLE BEACH CORPORATION 44 SOUTH BROADWAY, 4TH FLOOR | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2022 | | | | | | | | | Office below | r (give title) | 2 | Other (below) | specify | |
| (Street) WHITE PLAINS | N | Y | 10601 | | | 4. If Amendment, Date of | | | | of Original Filed (Month/Day/Year) | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| 4 | 0 | | le I - N | 1 | | | | | - | ed, Di | - | - | | ally Owne | | 6.0 | wnership | 7. Nature | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | | | Transaction Disposed | | ies Acquire Of (D) (Ins | | Benefi | ies cially Following | Form (D) c | m: Direct or Indirect Instr. 4) | of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | e v | Amount (A) or (D) | | Price | | ction(s) | | | (1150.4) | |
| Common Stock 02/10/2 | | | | | /2022 | 022 | | | S | | 1,600 | 1,600 D \$2 | | 8(1) 63 | 3,624 | | D | | |
| | | ٦ | able II | | | | | | | | posed of convert | | | y Owned | | | | | |
| 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) | action | 5. Nu of Deriv Secu Acqu (A) o Disp of (D | umber vative urities uired or osed) r. 3, 4 | | Exercition Da | able and 7. Title and Am of Securities | | nd Amount ties ng e Security | 8. Price of Derivative Security | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Natur of Indirec Beneficia Ownersh (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Stock Option (Right to Buy) | \$3.12 | | | | | | | | (2) |) | 04/11/2028 | Common Stock | 16,025 | | 16,025 | | D | | |
| Stock Option (Right to Buy) | \$12.1 | | | | | | | | (2) | | 04/01/2029 | 04/01/2029 Common Stock 2 | | | 4,132 | | D | | |
| Stock Option (Right to Buy) | \$5.95 | | | | | | | | (2) |) | 04/01/2030 | Common Stock | 16,806 | | 16,80 | 06 | D | | |

Explanation of Responses:

1. SALE PURSUANT TO A 10b5-1 PLAN.

2. All options are exercisable as of the date of this Form 4.

Remarks:

/s/ Andrew Wolfe

** Signature of Reporting Person

02/11/2022 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.