FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL |
|---|------------------------|-----------|
| | OMB Number: | 3235-0287 |
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| l | 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).

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

| 1. Name and Talbot I | SP | 2. Issuer Name and Ticker or Trading Symbol SPORTSMAN'S WAREHOUSE HOLDINGS, INC. [SPWH] | | | | | | | | (Chec | k all app Dired | olicable) | | erson(s) to I | | | | | |
|--|--|---|---|------|-----|--|-----|---|--------|-------------------------------|-----------------------|---|-----------------------|---|---|---|--------------------------------------|--|--|
| (Last) | (Fir | rst) (| | | | | | | | | | X | below) | | | below | | | |
| C/O SPO INC. | | 3. Date of Earliest Transaction (Month/Day/Year) 01/16/2015 | | | | | | | | | | CFO & | s Sec | cretary | | | | | |
| 7035 SOUTH HIGH TECH DRIVE | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) MIDVALE UT 84047 | | | | | | | | | | | | | Line) X | ·′ | | | | | |
| (City) | City) (State) (Zip) | | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of | | | | | Benefic | | ies cially Following | Forr (D) | m: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transa | action(s) 3 and 4) | | | (11150. 4) |
| Common Stock 01/16/201 | | | | | 015 | 15 | | | P | | 1,000 | A | \$6.425 | 51 ⁽¹⁾ | 442,307 | | | I | By The Kevan P. Talbot Revocable Trust |
| | | Та | ble II | | | | | | | | osed of, convertib | | | | wned | | | | |
| 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) | | | ransaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | te Exer ation D th/Day/ | Year) | 7. Title Amour Securit Underly Derivat Securit and 4) | nt of ties ying | Der | Price of rivative curity str. 5) | 9. Number of derivative Securities Seneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | 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 \$6.42 to \$6.43, 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 this footnote (1)

<u>/s/ Kevan P Talbot</u> <u>01/16/2015</u>

** 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.