

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

OMB APPR	OVAL			
OMB Number:	3235-0104			
Estimated average burden				
nours per response				

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)								
Name and Address of Reporting Person* Holtz Paul	2. Date of Event Requiring Statement (Month/Day/Year)  — 11/22/2021			3. Issuer Name and Ticker or Trading Symbol KORE Group Holdings, Inc. [KORE]				
(Last) (First) (Middle) C/O KORE GROUP HOLDINGS, INC., 3700 MANSELL ROAD, SUITE 300			Issuer (Check Director X Officer (give titl	Issuer (Check all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) ALPHARETTA, GA 30022						6. Individual or Joint/Group Filing(Check Applicable Line) 		
(City) (State) (Zip)	(City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)	2. Amount of Sec Beneficially Own (Instr. 4)			Owned		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Reminder: Report on a separate line for each class of Persons who respond unless the form displ  Table II - Derivative	d to the collect ays a current	ction of tly valid	informa OMB c	ation contained in t		·		
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		ate S			Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	ate Exp xercisable Date	iration e T	Title Sha	nount or Number of ures	Security	(D) or Indirect (I) (Instr. 5)		

## **Reporting Owners**

		Relat		
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Holtz Paul C/O KORE GROUP HOLDINGS, INC. 3700 MANSELL ROAD, SUITE 300 ALPHARETTA, GA 30022			See Remarks	

## **Signatures**

/s/ Paul Holtz	12/02/2021
***Signature of Reporting Person	Date

## **Explanation of Responses:**

### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

#### Remarks:

Interim Chief Financial Officer

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of the coll	ber.