## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

W	/ashing	ton, D	.C. 20	)549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	OWNERSHIP

OMB APF	'ROVAL
OMB Number:	3235-0287
Estimated average	burden
hours par 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

Name and Address of Reporting Person*     Maruniak Joyce				2. Issuer Name and Ticker or Trading Symbol TILE SHOP HOLDINGS, INC. [ TTS ]									(Ch	eck all a	appli recto	cable)	ng Per	son(s) to Iss 10% O Other (s	wner			
(Last) (First) (Middle) C/O TILE SHOP HOLDINGS, INC. 14000 CARLSON PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 11/02/2017										X Officer (give title Offier (specify below)  Sr. VP - Supply Chain						
(Street) PLYMO			55441 (Zip)		_   4. II	f Ame	ndmen	t, Date	of C	Original F	iled	(Month/D	ay/Year)		Line	e) <mark>X</mark> F	orm f	iled by One	e Rep	g (Check Ap orting Person n One Repo	on	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Date,		·,	Transaction Dispose Code (Instr. 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			and Securitie Benefici		es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	,	Amount	t (A) or Price		Price	Transac		tion(s)			(111311. 4)		
Common Stock 11/02/2					2/2017	2017			Α		11,650	0 <sup>(1)</sup> A		\$0	31,650(2)			D				
		Т	able II -									sed of onverti				Own	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ansaction ode (Instr.		of E		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	Deriva Securi	B. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title		mount r umber f hares							
Stock Option (Right to	\$17.9									(3)	03	3/06/2024	Commo	4	0,000			40,000	)	D		

## **Explanation of Responses:**

- 1. Represents 11,650 shares of restricted stock for which the risks of forfeiture will lapse in installments of 2,912 shares on each of November 2, 2018 and November 2, 2019 and 2,913 shares on each of November 2, 2020 and November 2, 2021.
- 2. Includes (i) 20,000 shares of restricted stock for which the Company's purchase option will lapse in equal installments of 4,000 shares on each of March 6, 2018, March 6, 2019, March 6, 2020, March 6, 2021 and March 6, 2022; and (ii) 11,650 shares of restricted stock for which the risks of forfeiture will lapse in installments of 2,912 shares on each of November 2, 2018 and November 2, 2019 and 2,913 shares on each of November 2, 2020 and November 2, 2021.
- 3. Options to purchase 8,000 shares vest on each of March 6, 2018, March 6, 2019, March 6, 2020, March 6, 2021 and March 6, 2022.

## Remarks:

/s/ John R. Houston as Attorney-in-Fact for Joyce 11/06/2017 Maruniak pursuant to Power of Attorney previously filed.

\*\* 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.