|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FORM 4** | | **UNITED STATES SECURITIES AND EXCHANGE COMMISSION  Washington, D.C. 20549** | | | | | | | | | | | | OMB APPROVAL | | |
| **🞏 Check this box if no longer**  **subject to Section 16. Form 4 or**  **Form 5 obligations may continue.**  *See* **Instruction 1(b).** | | | **STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP** | | | | | | | | | | | OMB Number: 3235-0287 Expires: December 31, 2024 Estimated average burden hours per response. . . . . . .0.5 | | |
| **🞏 Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c).**  *See* **Instruction 10.** | | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | |  | | |
| (Print or Type Responses) | | |  | | | | | | | | | | |  | | |
| 1. Name and Address of Reporting Person\* | | | 2. Issuer Name **and** Ticker or Trading Symbol | | | | | | | 5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  Director 10% Owner | | | | |
| (Last) (First) (Middle) | | | | 3. Date of Earliest Transaction Required to be Reported  (Month/Day/Year) | | | | | | | Officer (give Other (specify  title below) below) | | | | |
| (Street) | | | | 4. If Amendment, Date Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person | | | | |
| (City) (State) (Zip) | | | |  | | | | | | | | | | | |
| **Table 1 — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned** | | | | | | | | | | | | | | |
| 1. Title of Security  (Instr. 3) | | | | 2. Transaction  Date  (Month/  Day/  Year) | 2A. Deemed Execution Date, if any  (Month/  Day/  Year) | 3. Transaction  Code  (Instr. 8) | | 4. Securities Acquired (A)  or Disposed of (D)  (Instr. 3, 4 and 5) | | | | 5. Amount of  Securities  Beneficially  Owned   Following  Reported  Transaction(s)  (Instr. 3 and 4) | 6. Ownership  Form:  Direct (D)  or  Indirect (I)  (Instr. 4) | | 7. Nature of  Indirect  Beneficial  Ownership  (Instr. 4) |
| Code | V | Amount | (A)  or  (D) | Price | |
|  | | |  |  |  |  |  |  |  | |  |  | |  |
|  | | |  |  |  |  |  |  |  | |  |  | |  |
|  | | |  |  |  |  |  |  |  | |  |  | |  |

**FORM 4 (continued)**

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (*e.g*., puts, calls, warrants, options, convertible securities)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Title of Derivative  Security  (Instr. 3) | 2.Conver-  sion or  Exercise  Price of  Deriv-  ative  Security | 3. Trans-  action  Date  (Month/  Day/  Year) | 3A. Deemed Execution Date,  if any (Month/  Day/ Year) | 4. Trans-  action   Code  (Instr. 8) | | 5. Number of Deriv- ative Securities Acquired (A) or  Disposed of (D)  (Instr. 3, 4 and 5) | | 6. Date Exerc-  isable and   Expiration   Date  (Month/  Day/  Year) | | 7. Title and Amount of Underlying Securities  (Instr. 3 and 4) | | 8. Price   of  Derivative   Security   (Instr. 5) | 9. Number  of Derivative  Securities  Beneficially Owned at End of Month (Instr. 4) | 10. Owner- ship Form of Deriv- ative Security Direct (D) or Indirect (I) (Instr. 4) | 11. Nature  of  Indirect  Benefi- cial  Owner- ship (Instr. 4) |
|  |  |  |  |  |
| Code | V | (A) | (D) | Date Exer-cisable | Expir-ation Date | Title | Amount or Number of Shares |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Explanation of Responses: