FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT OF | CHANGES IN | BENEFICIAL | OWNERSHIP |
|--------------|-------------------|------------|------------------|

| OMB APPROVAL | | | | | | | | |
|-----------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average but | rden | | | | | | | |
| 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

| | | Reporting Person* | | | | | | cker or Tr | | | | | | elationship eck all appli | | g Per | son(s) to Iss | uer |
|--|--|-------------------|--------------------------------------|---------------------------------|---|--------------|---|--------------------------------------|--------|---|---|-------------------------------|--|--|---------------|--|---|------|
| Ellis W | <u>'illiam Do</u> | <u>on</u> | | 1 | JIIU A | 110 | iding | <u>,5, 111C.</u> | LAL | ni A | | | 7 | Directo | or | | 10% Ov | vner |
| (Last) | ` | rst) (| (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2022 | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | |
| 8214 WESTCHESTER DRIVE, SUITE 800 | | | | 4. 1 | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | |
| (Street) | S T | X | 75225 | | | | | | | | | | Line | Form 1 | iled by Mo | | orting Perso n One Repo | - 1 |
| (City) | (Si | tate) (| (Zip) | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | Transaction ite onth/Day/Ye | Execution I Day/Year) if any | | cution Date, | | Transaction Disposed Code (Instr. 5) | | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | 4 and Securiti | | es F ally (I Following (I | Form (D) o | . Ownership orm: Direct D) or Indirect) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | v | Amount | t (A) or Pi | | rice | Transact (Instr. 3 | ction(s) | | | (Instr. 4) | |
| Common Stock 07/ | | | 07/01/2022 | 2 | M 793 A | | | (1) | 176 | 176,193 | | D | | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Derivative Conversion Security or Exercise (Month/Day/Year) Execution Date, if any | | Code | ransaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | Code | v | (A) | (D) | Date Exercisa | | expiration Pate | Title | Amo or Num of Sha | ber | | | | | |
| Restricted | (1) | 07/01/2022 | | M | | | 793 | (2) | | (2) | Common | 79 | 03 | \$0 | 1,587 | | D | |

Explanation of Responses:

- 1. Each restricted stock unit represents a right to receive at settlement one share of common stock of the Company.
- 2. The reporting person was granted 3,173 restricted stock units, vesting in four equal installments on the first calendar day following the end of each quarter during fiscal year 2022.

Remarks:

07/05/2022 /s/ C. Malcolm Holland

** 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.