## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
wasiiiigton,	D.C.	20049

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours ner resnonse.	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

	nd Address of r <u>Harvey</u>	Reporting Person*			<u>N</u>	1ES	r Name <b>and</b>	GRO	OU	JP INČ	[ N	MESA ]			lationship of ck all applica Director		Perso	n(s) to Issue	
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/18/2024								Officer ( below)	give title		Other (specification)	pecify		
410 N. 44TH STREET SUITE 700						4. If Amendment, Date of Original Filed (Month/Day/Year) 06/20/2024							6. Inc Line)	Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														V	Form file	ed by One	Repor	ting Person	
PHOENI	X A	Z	85008											Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		F	Rule 10b5-1(c) Transaction Indication							·						
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plar the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								an that i	s intended to	satisfy			
		Та	ıble I - Nor	n-Der	ivati	ve S	ecurities	Ac	qu	uired, Di	ispo	osed o	f, or Be	neficially	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date		Transaction Disposed Code (Instr.			ties Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code V	1	Amount	(A) o (D)	r Price	Transaction	Transaction(s) (Instr. 3 and 4)			instr. 4)
	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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code (Instr					6. Date Exercisable a Expiration Date (Month/Day/Year)				of Securit Underlyin	d Amount ies g Derivative Instr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)		ate xercisable	Ex <sub>i</sub>	piration	Title	Amount or Number of Shares		(Instr. 4)			
Restricted Stock Award	\$0	06/18/2024			A		31,377 <sup>(1)</sup>			(2)		(2)	Common Stock	31,377 <sup>(1)</sup>	\$0	31,377	7 <sup>(1)</sup>	D	

## **Explanation of Responses:**

- 1. On June 20, 2024, the reporting person filed a Form 4 which inadvertently reported the number of shares received under a restricted stock award. The initial Form 4 incorrectly indicated that the number of shares received under Column 5, 7 and 9 was 56,329 and the correct number of shares should have been 31,377.
- 2. A restricted stock award of 31,377 shares was granted under the 2018 Equity Incentive Plan on June 18, 2024 and will vest on June 18, 2025.

07/15/2024

\*\* 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.