Edgar Filing: ROTH ALAN TODD - Form 4

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Form 4											
August 20, 20	1								OMB AF	PROVAL	
	UNITEI) STATES		ITIES Al hington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer			F CHAN	IGES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Expires: Estimated a burden hour response		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	ns Section 17	7(a) of the	Public Ut		ing Con	npany	y Act of	e Act of 1934, 7 1935 or Section 0			
(Print or Type R	lesponses)										
ROTH ALAN TODD Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
					(Check all a					ll applicable)	
(Last) (First) (Middle) 3. Date of (Month/D) 1919 GALLOWS ROAD SUITE 08/17/20 1000 08/17/20				-				Director 10% Owner Officer (give title X Other (specify below) below) below) Managing Director			
	(Street)	Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
VIENNA, V	A 22182							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-Do	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	08/17/2018			S	2,300	D	\$ 65.15	8,180.64	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ROTH ALAN TODD 1919 GALLOWS ROAD SUITE 1000 VIENNA, VA 22182				Managing Director				
Signatures								
/s/ Michael B. Kirwan, Attorney-in-Fact Roth	Todd	08/20/2018						
<u>**</u> Signature of Reporting Person		Date						
Explanation of Responses:								

Explanation of Responses:

* 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. 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.