FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL O	OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Taylor Tate Deborah</u>																onship of Reporting Il applicable) Director		son(s) to Iss 10% O	
(Last) (First) (Middle) 500 11TH AVENUE NORTH					3. Date of Earliest Transaction (Month/Day/Year) 03/16/2021										Officer (give title below)		Other (below)	specify	
SUITE 1	.000				4. If	f Ame	endment,	Date	of Original	Filed	(Month/Da	ay/Year)		6. In		Joint/Group	Filino	g (Check Ap	pplicable
(Street) NASHV	ILLE T	N	37203									<u>></u>	Form filed by One Reporting Person Form filed by More than One Reporting Person				- 1		
(City)	(S	tate)	(Zip)																
		Tab	le I - Non	-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed c	of, or B	enefi	ciall	y Owned	l			
Diam's Committee of Committee o			Date	nsaction h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.						es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pi	ice	Transact (Instr. 3	tion(s)	(Instr. 4)		
Common	Stock			03/16	5/2021	1			M		2,610	(1)	. \$	0.00	21	21,378		D	
		7	able II - I (uired, D s, optior						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transactior Code (Instr. 3)				6. Date Exercisi Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	Beneficial Ownership (Instr. 4)
				Code V (A) (D) Exercisable Expiration Date Title Shares															
Restricted Share Units	\$0.00 ⁽²⁾	03/16/2021			M			879	(3)		(4)	Common Stock	87	79	\$0.00	0		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/16/2021			М			786	(5)		(4)	Common Stock	78	86	\$0.00	787		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/16/2021			М			945	(6)		(4)	Common Stock	94	15	\$0.00	1,891		D	
Restricted Share Units	\$0.00 ⁽²⁾	03/17/2021			A		2,830		(7)		(4)	Common Stock	2,8	30	\$0.00	2,830		D	

Explanation of Responses:

- 1. Shares acquired on vesting of restricted share units.
- 2. Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- 3. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 15, 2019 in three equal installments.
- 4. Not applicable.
- 5. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 15, 2020 in three equal installments.
- 6. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSUs vest annually beginning March 11, 2021 in three equal installments.
- 7. The RSU's are subject to a three year vesting schedule, contingent upon continued service at the time of vesting. The RSU's vest annually beginning March 17, 2022 in three equal installments,

Remarks:

Deborah Taylor Tate ** Signature of Reporting Person 03/18/2021 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.