FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| vasilington, D.C. 20049 | Vashington, | D.C. | 20549 |
|-------------------------|-------------|------|-------|
|-------------------------|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

|                                                               | tion 1(b).                                                            | unue. See                                  |                                                             | File     |                                         |                                                                                                                                                                                                                                                        |                                                                                                                   |             | a) of the Se                            |      |                                                                                      |       |               | 34                                                  |                                                                                                                   | nours               | per re                                                                   | esponse:                                                           | 0.5         |
|---------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|----------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------|------|--------------------------------------------------------------------------------------|-------|---------------|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|-------------|
|                                                               | nd Address o                                                          | of Reporting Person                        | •                                                           |          |                                         |                                                                                                                                                                                                                                                        |                                                                                                                   |             | cker or Trad                            | _    | •                                                                                    | ]     |               | (Cl                                                 | Relationship<br>neck all appl                                                                                     | licable)            | ng Pe                                                                    | rson(s) to Is                                                      |             |
| (Last)                                                        | (F                                                                    | First)                                     | (Middle)                                                    |          |                                         | 3. Date of Earliest Transaction (Month/Day/Year) 06/06/2023                                                                                                                                                                                            |                                                                                                                   |             |                                         |      |                                                                                      |       |               |                                                     | Office<br>below                                                                                                   | r (give title       |                                                                          | Other (s<br>below)                                                 | pecify      |
| 500 11TH AVENUE NORTH<br>SUITE 1000                           |                                                                       |                                            |                                                             |          | 4. If A                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                                                                                                                                                                               |                                                                                                                   |             |                                         |      |                                                                                      |       |               | Lin                                                 | 6. Individual or Joint/Group Filing (Check Applicable Line)                                                       |                     |                                                                          |                                                                    |             |
| (Street) NASHVILLE TN 37203                                   |                                                                       |                                            |                                                             |          |                                         |                                                                                                                                                                                                                                                        |                                                                                                                   |             |                                         |      |                                                                                      |       |               |                                                     | X Form filed by One Reporting Person  Form filed by More than One Reporting  Person                               |                     |                                                                          |                                                                    |             |
| (City)                                                        | (5                                                                    | State)                                     | (Zip)                                                       |          | $ $ $ $ $ $ $ $                         | The 10b5-1(c) Transaction Indication  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. |                                                                                                                   |             |                                         |      |                                                                                      |       |               |                                                     | ied to                                                                                                            |                     |                                                                          |                                                                    |             |
|                                                               |                                                                       | Tabl                                       | e I - Nor                                                   | า-Deriva | ative                                   | Sec                                                                                                                                                                                                                                                    | uritie                                                                                                            | s Ac        | quired, I                               | Disp | osed                                                                                 | of, o | r Ben         | eficia                                              | lly Owne                                                                                                          | ed                  |                                                                          |                                                                    |             |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |                                                                       |                                            |                                                             |          | Execution Da                            |                                                                                                                                                                                                                                                        |                                                                                                                   | Code (Insti |                                         |      |                                                                                      |       |               | Benefic                                             | ies<br>cially<br>Following                                                                                        | Forn<br>(D) (       | n: Direct<br>or Indirect<br>nstr. 4)                                     | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |             |
|                                                               |                                                                       |                                            |                                                             |          |                                         |                                                                                                                                                                                                                                                        |                                                                                                                   |             | Code                                    | v    | Amoun                                                                                | t     | (A) or<br>(D) | Price                                               | Transa<br>(Instr. 3                                                                                               | ction(s)            |                                                                          |                                                                    | ,iiisti. 4) |
| Common                                                        | Stock Hol                                                             | lding                                      |                                                             |          |                                         |                                                                                                                                                                                                                                                        |                                                                                                                   |             |                                         |      |                                                                                      |       |               |                                                     | \$0 D                                                                                                             |                     |                                                                          |                                                                    |             |
|                                                               |                                                                       | Ta                                         |                                                             |          |                                         |                                                                                                                                                                                                                                                        |                                                                                                                   |             | uired, Di<br>s, option                  |      |                                                                                      |       |               |                                                     | y Owned                                                                                                           |                     |                                                                          |                                                                    |             |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |          | 4.<br>Transaction<br>Code (Instr.<br>B) |                                                                                                                                                                                                                                                        | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |             | 6. Date Exe<br>Expiration<br>(Month/Day |      | le and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) |       |               | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | e<br>s<br>ally<br>g | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |             |
|                                                               |                                                                       |                                            |                                                             |          | Code                                    | v                                                                                                                                                                                                                                                      | (A)                                                                                                               | (D)         | Date<br>Exercisable                     |      | opiration<br>ate                                                                     | Title | O<br>N<br>O   | lumber                                              |                                                                                                                   |                     |                                                                          |                                                                    |             |
| Restricted<br>Share                                           | \$0 <sup>(1)</sup>                                                    | 06/06/2023                                 |                                                             |          | A                                       |                                                                                                                                                                                                                                                        | 3,377                                                                                                             |             | (2)                                     |      | (3)                                                                                  | Comi  |               | 3,377                                               | \$0                                                                                                               | 3,377               |                                                                          | D                                                                  |             |

## **Explanation of Responses:**

- 1. Each restricted share unit (RSU) represents the contingent right to receive one share of common stock upon vesting of the unit.
- 2. 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 June 6, 2024 in three equal installments.
- 3. Not applicable.

/s/ A. Alex Jahangir

06/13/2023

\*\* 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.