SEC Form 4																	
FORM 4	TED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				suant t	o Sectio	on 16(ES IN I (a) of the Se Investment	ecurit	SHIP	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5							
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
1. Name and Address of Reporting Per- O'Hara Kevin P											(Ch	Relationship of Reporting Person(s) to Issuer heck all applicable) Director 10% Owner				wner	
(Last) (First) 500 11TH AVENUE NORTH SUITE 1000	'H AVENUE NORTH				3. Date of Earliest Transaction (Month/Day/Year) 08/23/2024									☑ Officer (give title below) Other (specify below) Senior Vice President			
(Street) NASHVILLE TN		4. lf	Line)									loint/Group Filing (Check Applicable led by One Reporting Person led by More than One Reporting					
(City) (State)	(Zip)																
Da			ative action Day/Ye	ar) if	2A. Deemed Execution Date		, 3. Transa Code (action	4. Secur Dispose	of, or Benefi ities Acquired (A d Of (D) (Instr. 3,		(A) or	5. Amou Securitie Benefici Owned F	nt of es ally Following	Form (D) o	Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	v	Amount	(/ (E	() or))	Price	Reporte Transact (Instr. 3	tion(s) and 4)	<u> </u>		
Common Stock Holding	Table II - I		tive (ritioo	<u> </u>							· · · · ·	527		D	
							s, option						Owneu				
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date (Month/Day/Yet Security Security	Execution	Date,	4. Transaction Code (Instr. 8)				6. Date Ex Expiration (Month/Da		7. Title and Amount of Securities Underlying Derivative Secu (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)	Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	0 N 0	mount r lumber f hares					
Restricted Share Units \$0 ⁽¹⁾ 08/23/2024			A		6,100		(2)		(3)	Comm Stock		5,100	\$ 0	6,100)	D	

anation 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. Vesting of these RSUs is contingent upon continued service at the time of vesting and the achievement of certain performance criteria. The performance criteria will be established on an annual basis by the Compensation Committee of the Board of Directors. Up to 10% vest on February 23, 2025 for the period July 1, 2024 through December 31, 2024; up to 15% vest on February 23, 2026 for the period January 1, 2025 through December 31, 2025; up to 20% vest on February 23, 2027 for the period January 1, 2026 through December 31, 2026; up to 25% vest on February 23, 2029 for the period January 1, 2026 through December 31, 2027; and up to 30% vest on February 23, 2029 for the period January 1, 2028 through December 31, 2028. Vesting will be determined based on actual performance. RSUs that do not vest during a performance period may become eligible for vesting during the next performance period.

3. Not applicable.

/s/ Kevin P. O'Hara

08/27/2024 Date

** Signature of Reporting Person

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.