Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPF	ROVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours por rosponso:	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*  LEBDA DOUGLAS R														5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
LEDU!											X	Direc			.0% O						
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									X	Offic belov	,	k	elow)	specify	
11115 RUSHMORE DR.						02/19/2019											Chairma	ın & CEC	)		
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
CHARLOTTE NC 28277																X Form filed by One Reporting Person					
(City) (State) (Zip)																Form filed by More than One Reporting Person					
		Tabl	e I - No	n-Deriva	ative S	Seci	uritie	s Acc	quired	, Dis	sposed o	of, o	r Bei	nefic	ially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transa Date				2. Transac	tion	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			I (A) or	5. Amount of securities Beneficially Owned Follo		ount of ties cially I Following	6. Owners Form: Dire (D) or Indi (I) (Instr. 4	ect rect	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(	A) or D)	Price	)		ted action(s) 3 and 4)			(Instr. 4)	
Common	02/19/2	2019			F <sup>(1)</sup>		23	D \$31		\$31	6.65	4,662		I		By spouse. <sup>(2)</sup>					
Common Stock																63	32,204	D			
Common Stock																4	5,374	I		Through Family Trust.	
Common Stock																1,0	000,000	I		Through Lebda Family Holdings, LLC. <sup>(3)</sup>	
	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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any				ansaction de (Instr.  5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			1		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form: Direct or Ind (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				,	ode ,	,	(A)	(D)	Date Evercisa		Expiration	Title	of								

## **Explanation of Responses:**

- 1. Disposition by the spouse ("Spouse") of the reporting person to the Company to satisfy tax withholding requirements in connection with the vesting of restricted stock units; no shares were sold by spouse.
- 2. The reporting person disclaims beneficial ownership of the shares and this report shall not be deemed an admission that the reporting person is the beneficial owner of the shares for purposes of Section 16 or any other purpose.
- 3. The reporting person disclaims beneficial ownership of the shares in which he does not have a pecuniary interest, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such shares for purposes of Section 16 or for any other purpose.

/s/ Ryan S. Quinn as Attorneyin-Fact for Douglas R. Lebda

02/21/2019

\*\* Signature of Reporting Person

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

- $^{\star}$  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.