SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL

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

| | 01 300 | cuon 30(n) or the in | ivesime | ni Cor | inpany Act of | 1940 | | | | | |
|--|--------------|---|-----------|-----------------|------------------------------------|------------------|---|---|---|---|--|
| 1. Name and Address of Reporting Person [*] Tanda Stephan B. | | uer Name and Tick redion Inc [IN | | ading | Symbol | | ationship of Reportin k all applicable) Director | ng Person(s) to 10% 0 | | | |
| (Last) (First) (Middle) | | te of Earliest Transa 1/2023 | action (N | Month/ | /Day/Year) | | Officer (give title below) | | (specify | | |
| 5 WESTBROOK CORPORATE CENTER | 4. If A | mendment, Date o | f Origina | al Fileo | d (Month/Day/ | 6. Indi Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | | | | | | | X | Form filed by On | e Reporting Per | son | |
| WESTCHESTER IL 60154 | | | | | | | | Form filed by Mo Person | re than One Re | porting | |
| (City) (State) (Zip) | Rule | e 10b5-1(c) | Tran | sact | tion Indic | | | | | | |
| | | Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In | | | | | | | en plan that is int | ended to | |
| Table I - Non-D | Derivative S | ecurities Acq | uired, | Dis | posed of, | or Ber | neficially | / Owned | | | |
| 1. Title of Security (Instr. 3) Date (Month/Da | | Execution Date, | | ction Instr. | 4. Securities Disposed Of 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) | |
| Common Stock 0 | 03/31/2023 | | Α | | 381(1) | A | \$98.41 | 381 | D | | |
| | | | | | | | | | | through | |

| Common Stock | | | | | | | | 6,346 | I | through The Tanda Joint Living Trust |
|--|--|--|--|--|--|--|--|-------|---|---|
| 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Number of 6. Date Exercisable and Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 7. Titl Amou Secur Unde Deriv Secur 3 and | int of rities rlying ative rity (Instr. | 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) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
|---|---|--|---|------------------------------|---|--|-----|---|---|---|--|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. These are shares of common stock issued to the Company's outside directors as part of their annual retainer.

Michael N. Levy, attorney-in-04/04/2023

fact

** 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.