FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	nd Address of <mark>Ilan Nanc</mark>	Reporting Person							er or Tradir <u>o, Inc. /I</u>			LL]			elationship o ck all applica Director	able)	g Perso	on(s) to Issi 10% Ov		
(Last)	,	First)		3. Date of Earliest Transaction (Month/Day/Year) 06/20/2023									Officer (give title below)		Other (spelow)		I			
316 SECOND AVENUE, S.W.					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	treet) CULLMAN AL 35055											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(City) (State) (Zip)				Ru	Rule 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.														
		Та	ble I - No	n-Dei	rivativ	e S	ecurities	s Ac	quired, [	Disp	osed o	of, or B	enef	ficially	Owned					
Date				nsaction		2A. Deemo Execution if any (Month/Da	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				and Securities Beneficially Owned Followin		Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A) or (D)		) or )	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock														48,840(1)			D			
Common Stock															32,105				By Spouse	
Common Stock													12,9	960		I	By IRA			
Common Stock														911		I		By Spouse's Company		
Common Stock														400			I	By Son		
			Table II -						uired, Di , options	•		•		•	Owned					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		5. Numbe Derivative Securities Acquired or Dispos of (D) (Ins 3, 4 and 5	(A) ed	6. Date Exe Expiration I (Month/Day	Date		7. Title and Amof Securities Underlying Der Security (Instr. 4)		rivative	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisable		opiration	Title	or Nu	nount mber of ares		(Instr. 4)				
Stock Options	\$10.54	06/20/2023			A		22,162 <sup>(2)</sup>		06/20/2024	06	5/20/2033	Commo	22	,162(2)	\$0	22,162	(2)	D		
Stock Options	\$9.856								08/18/2021	08	3/18/2030	Commo	17	,045(3)		17,04	5	D		

## Explanation of Responses:

- $1. \ Includes \ shares \ of \ restricted \ stock \ that \ vest \ at \ a \ rate \ of \ 20\% \ per \ year \ commencing \ on \ August \ 18, \ 2021.$
- 2. Stock option vest at a rate of 20% per year commencing on June 20, 2024.
- 3. Stock option vest at a rate of 20% per year commencing on August 18, 2021.

/s/ Edward A. Quint, pursuant to power of attorney

06/22/2023

\*\* Signature of Reporting Person

Date

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.