SEC Form 4	
------------	--

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

Г

OMB Number: 3235-0287							
Estimated average burde	en						
hours per response:	0.5						

7. Nature of Indirect Beneficial Ownership (Instr. 4)

																	VAL
Sectio obligat	this box if no n 16. Form 4 d tions may cont tion 1(b).		STA		d pursuar	E CHANGE to Section 16(a ction 30(h) of the	a) of the S	ecuriti	es Exchar	nge Ac	t of 193		HIP	Estim	Number ated ave per res	erage burde	3235-02 n (
	nd Address o Paul D	f Reporting Perso	n*			er Name and Tick <u>, Inc.</u> [GEV		ding S	ymbol				elationship o ck all applio Directo	cable) r	g Pers	10% O	wner
(Last) C/O GE	```	First) 345 INVERNES	(Middle)	SOUTH		. Date of Earliest Transaction (Month/Day/Year)						(give title CCO	& CI	Other (below)	specify		
BUILDI	NG C, SU	TE 310			4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check App Line) X Form filed by One Reporting Person					
(Street) ENGLE	WOOD (0	80112											led by Mo	•	rting Perso One Repo	
(City)	(State)	(Zip)			10b5-1(c) eck this box to indii isfy the affirmative	cate that a	transa	ction was n	nade p	ursuant to	o a contra nstruction	ct, instruction 10.	n or written	plan the	at is intende	d to
		Та	able I - No	n-Deriv	ative S	ecurities Ac	quired,	Disp	oosed o	of, or	Bene	ficially	v Owned				
1. Title of Security (Instr. 3)		Date		action Day/Year)	Execution Date,		3. Transaction Code (Instr. 8)		ities A d Of (E	cquired D) (Instr.	(A) or 3, 4 and	, 4 and Securities Beneficially Owned Fol		Form	nership : Direct Indirect str. 4)	7. Natur of Indire Benefic Owners	
							Code	v	Amount		(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4
Common Stock ⁽¹⁾ 08/03					/2023		Α		207,2	22	А	\$ <mark>0</mark>	685	i,190		D	
						curities Acqu lls, warrants							Owned				
1. Title of Derivative Security	2. Conversion or Exercise		3A. Deeme Execution	Date, Ti	ansaction ode (Instr.	Derivative	6. Date Expiration (Month/D	n Date		of Se	le and Ar curities rlying	mount	8. Price of Derivative Security	9. Numbe derivative Securitie	e	10. Ownership Form:	11. Na of Inc Bene

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. Transac Code (Ir 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	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		Transaction(s) (Instr. 4)		
Stock Option	\$1.75	08/03/2023		Α		207,222		(2)	08/02/2033	Common Stock	207,222	\$ 0	207,222	D	

Explanation of Responses:

1. Represents restricted common stock that vests in three equal annual installments beginning on the first anniversary of the grant date, provided that the reporting person remains in continuous service with the issuer as of each vesting date.

2. Represents stock options that vest in three equal annual installments beginning on the first anniversary of the grant date, provided that the reporting person remains in continuous service with the issuer as of each vesting date.

Remarks:

/s/ E. Cabell Massey, Attorney-08/04/2023

in-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.