SEC Form 4	
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FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l		DVAL									
	OMB APPROVAL OMB Number: 3235-0287 Estimated average burden burus per response: 0.5										
	Estimated average burd	en									
	hours per response:	0.5									

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By Trust

6,027

Date

Filed	pursuant to Section	n 16(a) of	f the Securities	Exchange Ac	t of 1934

				or S	ection 30(h) of the I	nvestm	ent Co	mpany Act of	1940						
1. Name and Address of Reporting Person [*] HOLCOMBE GREGORY F					suer Name <mark>and</mark> Tick ange County I					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HOLCOMBI	E GREGUR	<u>. I F</u>					-1->-			X Director	109	6 Owner			
(Last)	(First)	(Middle)			ate of Earliest Trans	action (Month	/Day/Year)		Officer (give tit below)	le Oth bel	er (specify ow)			
212 DOLSON A	VENUE		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)											X Form filed by (One Reporting F	erson		
MIDDLETOW	N NY	10940									Form filed by I Person	More than One F	Reporting		
(City)	(State)	(Zip)		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.											
		Table I - No	on-Deriva	tive	Securities Acc	quired	l, Dis	sposed of,	or Be	neficial	ly Owned				
1. Title of Security (Instr. 3) Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Common Stock											34,429(1)(2)	D			
Common Stock											7,460	I	By Foundatio		
Common Stock											34,720	I	By LLC		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1	(e.g., puis, cuis, wirrants, options, converting 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)		of Deriv	r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		e Amount 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				
Phantom Stock	(3)	03/15/2024		Α		\$33		(3)	(3)	Common Stock	33	\$47.1	6,780	D	

Explanation of Responses:

Common Stock

1. Includes restricted stock units which vest 100% as of the date of grant and are settled in shares of Issuer common stock upon separation from service of the reporting person.

2. Includes restricted stock units which vest 100% on August 8, 2024 and are settled in shares of Issuer common stock upon separation from service of the reporting person.

3. Each share of phantom stock is the economic equivalent of one share of common stock and becomes payable upon the reporting person's separation of service as a director.

/s/ Jennifer Staub, pursuant to power of attorney 03/18/2024

** 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.