Edgar Filing: FARR KEVIN M - Form 4

FARR KEVI	NM											
Form 4												
May 22, 2018											PROVAL	
FORM	4 UNITED	STATES				ND EX(D.C. 205		NGE (COMMISSION		3235-02	87
Check this box if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERSHIP O SECURITIES						Expires: Estimated a		
Section 10 Form 4 or				SECU		11125				burden hours per response 0).5
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed pur s Section 17(a) of the H		ility H	old	ing Com	pany	Act of	e Act of 1934, f 1935 or Section 40			,
(Print or Type R	esponses)											
FARR KEVIN M Syml						Ticker or 7		g	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	3. Date of		•	-	~]		(Chec	k all applicable	e)	
, , ,	RLANDS BLVD	,	(Month/D 05/18/20	ay/Year		liisaction			Director Officer (give below) CHIEF FIN		Owner er (specify FICER	
(Street) 4. If Amer Filed(Mont						-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
IRVINE, CA	92618									fore than One Re		
(City)	(State)	(Zip)	Table	e I - Noi	n-De	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr.	8)	on(A) or Di (D)	sposed 4 and (A) or	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	05/18/2018			Р		5,000	A	\$ 3.83	5,000	D		

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

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 control number.

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	′ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships							
				Officer	Other				
FARR KEVIN M 10005 MUIRLANDS BLVD., SUITE G IRVINE, CA 92618				CHIEF FINANCIAL OFFICER					
Signatures									
/s/ Kevin Farr	05/22/2018								

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.