SEC Form 4

Instruction 1(b).

 \square

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deem Execution		4. Transad Code (I		5. Number of Derivative	6. Date Expirat (Month/	ion Da			of	8. Price of Derivative Security	9. Number derivative Securities	of 10. Ownershij Form:	11. Nature of Indirect Beneficial			
		Tal					ties Acqu varrants,							d					
Common Stock 05/17/2						4		S		737	D	\$191	.1	2,546	D				
								Code	v	Amount	(A) or (D) Price		Transa	action(s) 3 and 4)		(1150.4)			
1. Title of Security (Instr. 3) Date (Month/Date)						Exec if any	Deemed ution Date, / th/Day/Year)	3. Transa Code (8)		4. Securitie Disposed O 5)			nd Secur Benef	cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
		Table	I - Non	-Deriva	l tive S	ecui	rities Acq	uired,	Dis	posed of	, or Bei	nefici	ally Owr	ed					
		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.																	
(City)	(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication												
CONSHOHOCKEN PA 19428-2380												Form filed by More than One Reporting Person							
(Street)													- /	n filed by On	e Reporting Per	son			
901 E. HECTOR STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Last) (First) (Middle)						te of E 7/202	arliest Trans 4	action (N	Month/	Day/Year)		Offic belo	er (give title w)	Other below					
Henry (<u>Charlotte</u>		<u>Q0</u>	AKE	ER CHEN	MICA	LC	<u>ΟΚΡ</u> [Κ		X Dire	,	10% C	No Owner ther (specify elow) eck Applicable Person e Reporting is intended to nip ct ct ct ct ef Eneficial						
1. Name and Address of Reporting Person*							me and Tick					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							

Derivative Security (Instr. 3)	or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr.		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		Amount or Securities Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

Remarks:

Victoria K. Gehris, Attorney-05/21/2024

in-Fact for Charlotte C. Henry ** 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.