## Edgar Filing: Martell James J - Form 4

Mantall Iama

Martell James	s J											
Form 4												
April 24, 201	9											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
	- UNITED	STATES						ONID	3235-0287			
Check this box				shington, D.C. 20549				Number:	January 31,			
if no longe	er STATEN	MENT O	FCHAN	GES IN BENEFICIAL OWNE				NERSHIPOE	Expires:	2005		
subject to				SECURITIES						Estimated average		
Section 16 Form 4 or				SECONITIES						esponse 0.5		
Form 5		rsuant to	Section 16	5(a) of the	e Securit	ies E	xchang	e Act of 1934,	16300136	0.0		
obligation	<sup>s</sup> Section 17			• •				f 1935 or Sectio	n			
may conti See Instru	nue.		of the Inv	•	•	- ·						
1(b).	- uon				_							
(Print or Type R	esponses)											
1 Name and A	drass of Paparting	Dorson *	0 T					5 Delationship of	Donorting Dor	son(s) to		
1. Name and Address of Reporting Person *2. IssuerMartell James JSymbol				r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			-	E MINI II	NC IMIN	JTI						
(T i)		A. 111 \				11]		(Chec	ck all applicable	e)		
(Last)	(First) (	Middle)		Earliest Tra	ansaction			X Director	100	Owner		
			th/Day/Year) 3/2019				Officer (give title Other (specify					
STREET, SU			04725720	,1,7				below)	below)			
			4. If Ame	f Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
			nth/Day/Year)				Applicable Line)					
(								_X_Form filed by One Reporting Person Form filed by More than One Reporting				
PHOENIX, A	AZ 85008							Form filed by M Person	Aore than One Re	eporting		
(City)	(State)	(Zip)										
	. ,							uired, Disposed o				
1.Title of	2. Transaction Day			3. 4. Securities Acquired				5. Amount of Securities	6. Ownership Form: Direct			
Security (Month/Day/Year) Execution I (Instr. 3) any				n Date, if Transaction(A) or Disposed of Code (D)				Beneficially	(D) or	Beneficial		
× /	Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Owned	Indirect (I)	Ownership				
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common				coue v	Amount	(D)	ince					
Stock \$0.01	04/23/2019			А	2,899	А	\$	45,162	D			
Par Value							34.5					

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title Amoun Underl Securit (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Martell James J 4646 E VAN BUREN STREET SUITE 400 PHOENIX, AZ 85008	Х						
Signatures							
/s/ Christopher J. Miner as Attorney-in-fact	04/24/2019						
**Signature of Reporting Person		Dat	te				

## **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.