## 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,	DC	205/19
vvasiliilytuii,	D.C.	20049

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						
	OMB Number: Estimated average burd						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     DiSanto Michael															Check all ap Dire		ng Pers	10% Owner Other (specify below) Legal Officer	
(Last) (First) (Middle) 222 SOUTH MILL AVENUE #800					3. Date of Earliest Transaction (Month/Day/Year) 06/28/2019									beid	below)				
(Street) TEMPE (City)	AZ		35281 Zip)		_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							ine) X For For	,					
		Tabl	e I - Nor	n-Deriv	/ative	Se	curitie	s Acc	quired,	Dis	posed o	of, or	Bene	eficia	ally Own	ed			
			Date		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			nd Secu Bene Owne	ficially ed Following	Form	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D) P		Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock				06/2	06/28/2019				A <sup>(1)</sup>		4,776	6 A :		\$2	2.7 717,486 <sup>(2)</sup>			D	
Common Stock 06				06/2	8/2019				F <sup>(3)</sup>		1,331		D	\$2	.7 71	l <b>6,</b> 155 <sup>(2)</sup>		D	
		Та									sed of, onvertib				y Owned	I			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,		Transaction Code (Instr.		າ of lE		5. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	/ O Fe Oi (i)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Nun of Sha						

## **Explanation of Responses:**

- 1. Consists of a stock award in connection with the Company's 2019 Salary-for-Equity program made pursuant to the Company's Amended and Restated 2007 Equity Incentive Plan. Reporting Person elected to participate in this program and receive payment of 50% of his base salary in shares of the Company's common stock. The number of shares issued was determined by (i) dividing 1/12 of Reporting Person's enrolled salary by (ii) the trailing 30-day closing average of the Company's common stock (\$2.86 / share), rounded up to the nearest whole share.
- 2. This includes 181,293 unvested restricted stock units.
- 3. The forfeiture reported in this row represents shares that were withheld by the Company solely for the purpose of satisfying tax obligations arising upon the issuance of 4,776 shares pursuant to the Company's 2019 Salary-for-Equity program.

## Remarks:

Executed pursuant to the Limited Power of Attorney for Section 16 reporting obligations dated April 1, 2015.

Michael DiSanto /s/ James R.

Todd, Attorney-in-Fact

07/02/2019

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.