## SEC Form 4

## FORM 4

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

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

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

1. Name and Address of Reporting Person <sup>*</sup> GARDNER TIMOTHY J					er Name <b>and</b> Tick			Relationshi neck all app X Direc	,	ng Perso	on(s) to Is 10% Ov					
(Last) ONE TE	(Firs CHNOLOG	, , , , , , , , , , , , , , , , , , , ,	Middle)		3. Date 03/12	of Earliest Trans /2020	Day/Year)			Officer (give title below)		Other (specify below)				
(Street) INDIANAPOLIS IN 46268 (City) (State) (Zip)					4. If An	nendment, Date o	(Month/Day		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
		Table	l - Non-	-Deriva	tive Se	ecurities Acq	uired,	Disp	osed of,	or Ben	eficia	ally Own	ed			
1. Title of S	Security (Instr			- <b>Deriva</b> 2. Transac Date (Month/Da	ction	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)	ction	4. Securities Disposed O 5)	Acquire	d (A) or	5. Amo Securi Benefi Owneo	ount of ties cially I Following	6. Owne Form: D (D) or Ir (I) (Insti	Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
1. Title of S	Security (Instr			2. Transac Date	ction	2A. Deemed Execution Date, if any	3. Transa Code (	ction	4. Securities Disposed O	Acquire	d (A) or	5. Amo Securi Benefi Owneo Report Transa	ount of ties cially I Following	Form: D (D) or Ir	Direct ndirect r. 4)	of Indirect Beneficial
1. Title of S				2. Transac Date	ction ay/Year)	2A. Deemed Execution Date, if any	3. Transa Code ( 8)	Instr.	4. Securities Disposed O 5)	s Acquired f (D) (Inst (A) or	d (A) or r. 3, 4 ai	5. Amo Securi Benefi Owneo Report Transa (Instr.	ount of ties cially I Following red action(s)	Form: D (D) or Ir	Direct ndirect r. 4)	of Indirect Beneficial Ownership
		. 3)	ble II - D	2. Transac Date (Month/Da 03/12/2 Derivati	ction ay/Year) 2020 <b>ve Sec</b>	2A. Deemed Execution Date, if any	3. Transa Code ( 8) Code A	v V V	4. Securities Disposed O 5) Amount 2,540 Desed of, o	Acquired f (D) (Inst (A) or (D) A r Bene	d (A) or r. 3, 4 ar Price \$0 ficial	5. Amo Securi Benefi Benefi Transa (Instr. 7	ount of ties cially I Following red rction(s) 3 and 4) 7,185	Form: D (D) or Ir (I) (Insti	Direct ndirect r. 4)	of Indirect Beneficial Ownership

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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price 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				

Explanation of Responses:

## /s/Sonja K. McClelland

Attorney-in-fact for Timothy 03/13/2020

J. Gardner

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).