FORT WORTH

(City)

TX

(State)

76102

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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

					or S	ecti	ion 30(h) of thè	İnvestn	nent C	ompany Act	of 1940							
		of Reporting Person* s Richard									g Symbol			Check a	onship of all applica Director	able)	ing Pe	erson(s) to	Owner
(Last)	•	,	Middle))			of Earli 2024	est Trar	saction	(Mon	th/Day/Year)				Officer (below)	give title			r (specify v)
1600 W	EST 7TH	STREET			4. If a	Am	endmer	nt, Date	of Origi	nal Fi	led (Month/Da	ay/Year)		ine)				•	Applicable
(Street)	ORTH T	TX 7	6102											v		•		oorting Pe an One R	
(City)	(-	State) (2	Zip)		Ru	le	10b	5-1(c) Tra	nsa	ction Ind	licatio	on						
						Che sati:	eck this b	ox to ind	dicate that e defens	at a tra e cond	nsaction was n	nade purs 10b5-1(c)	suant to a . See Inst	contract	t, instructi 10.	ion or wri	itten pla	an that is ir	ntended to
		Table	I - N	on-Deriva	tive :	Se	curiti	es Ac	quire	d, Di	sposed o	f, or B	enefic	ially C	Owned	d l			
1. Title of Security (Instr. 3) 2. Trans			2. Transaction Date (Month/Day/			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				Acquired (A) or (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Tra	eported ansaction str. 3 and				(Instr. 4)
Common	Stock														4,30	8		D	
Common	Stock			02/13/20)24				S		37,867	D	\$117.	95	5,847,7	740		I	See footnote ⁽¹⁾
Common	Stock			02/14/20)24				S		24,174	D	\$119.	55	5,823,5	566		I	See footnote ⁽¹⁾
Common	Stock			02/15/20)24				S		24,398	D	\$119.	26	5,799,	168		I	See footnote ⁽¹⁾
		Tal	ble II								posed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security		Execu	eemed ution Date,	4. Transa Code 8)	acti	5. of Of Ser. Ac (A Di of	Numbe	6. Da Expir (Mon		rcisable and Date	7. Title Amou Securi Under Deriva	e and nt of ities lying ative ity (Instr.	8. Prio Deriva Secur (Instr.	rative rity S. 5) B O F	Number erivative ecurities eneficial wined ollowing eported ransactionstr. 4)	e S Illy	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownershi ct (Instr. 4)
					Code	v	, (A) (D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares						
		of Reporting Person* s Richard									•								•
(Last)	EST 7TH	(First) STREET	(N	/liddle)		_													
(Street)	/ORTH	TX	70	6102															
(City)		(State)	(Z	ľip)															
	nd Address ervices,	of Reporting Person* Inc.																	
(Last) 1600 W	EST 7TH	(First) STREET	(N	/liddle)															
						-													

1. Name and Address <u>Douglas R. Ri</u>							
(Last) 1600 WEST 7TH	(First) STREET	(Middle)					
(Street) FORT WORTH	TX	76102					
(City)	(State)	(Zip)					

Explanation of Responses:

1. These shares are owned by AFF Services, Inc., which is partially owned and 100% controlled by Douglas R. Rippel Revocable Trust (the "Trust"). The Trust and Douglas Richard Rippel are indirect beneficial owners of the reported securities.

Remarks:

/s/ Douglas R. Rippel 02/15/2024

** 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.