FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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 OMB Number: Estimated average burden hours per response: 0.5

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*															5. Relationship of Report (Check all applicable) Director			10% (Owner
(Last) (First) (Middle) 5400 LBJ FREEWAY SUITE 1500					3. Date of Earliest Transaction (Month/Day/Year) 08/22/2019									- X Officer (give title Other (specify below) below) SVP, Chief Accounting Officer					
(Street)	S T2	ζ 7	75240		4. If Amendment, Date of 0					of Original Filed (Month/Day/Year)					Forn	n filed by O	oup Filing (Check A One Reporting Person More than One Repo		son
(City)	(St	ate) (Zip)																
		Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	cially	/ Owne	ed			
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				Disposed O	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au 5)			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	- 1	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock 08/22			08/22/2	019				F		821(1)	D	\$15.	62	45,808(2)(3)(4)(5)		D			
Common Stock														3,(050	I	5 1 1 1 1 1 1	Represents shares neld of record by the reporting person's individual Retirement Account	
		Та	ble II -								osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Date Execution Month/Day/Year) if any				5. Number			Exerc	cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. Represents shares withheld by the Issuer in connection with the reporting person's net share settlement to satisfy tax liability upon the vesting of 2,084 shares of restricted stock that were granted to the reporting person on August 22, 2016. No shares were sold by the reporting person to satisfy this tax liability.
- 2. Includes 7,688 shares of restricted stock granted to the reporting person on April 29, 2019 that vest in equal installments on the first, second and third anniversaries of the date of grant.
- 3. Includes 11,980 shares of restricted stock granted to the reporting person on February 16, 2018 that vest in equal annual installments on the second and third anniversaries of the date of grant.
- 4. Includes 6,973 shares of restricted stock granted to the reporting person on July 6, 2017 that vest on the third anniversary of the date of grant.
- 5. Includes 1,862 shares of restricted stock granted to the reporting person on February 16, 2017 that vest on the third anniversary of the date of grant.

Remarks:

/s/ Robert T. Macalik, by Kyle 08/23/2019 A. Ellis as attorney-in-fact

** 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.