FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

L	OMB APPROVAL										
ľ	OMB Number:	3235-0287									
	Estimated average burden										
Ш	houre per reenonee.	0.5									

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

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* Strzelecki Angela							RNA GRA	NCES	IA S I	<u>NC</u> [1	AV FF	<u>ORS &</u>]	(Ch	elationship deck all applic Director Officer below)	cable) r (give title	g Pers	10% Ow Other (s below)	vner					
(Last) (First) (Middle) 521 WEST 57TH STREET							of Earli 2024	est Tran	isac	ction (Mo	nth/[Day/Year)		Pres									
(Street) NEW YO	ORK N	Y	10019		- 4. li	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filitine) X Form filed by One Re Form filed by More th											Repo	orting Persor	1				
(City)	(Si		(Zip)	. D		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														d to			
4 = 64			le I - Noi			_			qu		DIS					ly Owned		0.0		7. Nature			
Date					ansaction th/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Inst				ities Acquired (A) or d Of (D) (Instr. 3, 4 a			Benefici Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect Beneficial Ownership			
											v	Amount		(A) or (D)	Price	Reporter Transact (Instr. 3	tion(s)			(Instr. 4)			
Common	Stock			04/0	5/2024	4				М		622(1))	A	\$0 (2)	7,	7,644		D				
Common Stock 0					5/2024					М		518(1))	A	\$0 (2)	8,	8,162		D				
Common Stock 04/05/						4				F		161(3)	B) D		\$83.3	8,001		D					
Common	Stock			04/0	5/2024	4				F		193(3))	D	\$83.3	4 7,	808		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	ate, Transac		of I		Ex	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	O Fo	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)		ate xercisabl	e E	expiration Date	Title		Amount or Number of Shares								
Restricted Stock Units	(2)	04/05/2024			M			622 ⁽¹⁾		(4)		(4)		nmon ock	622	\$0.0000	2,560		D				
Restricted Stock Units	(2)	04/05/2024			M			518 ⁽¹⁾	04	4/05/2024	1 0	4/05/2024		nmon ock	518	\$0.0000	0.0000)	D				

Explanation of Responses:

- 1. Reflects vesting and settlement of Restricted Stock Units ("RSUs") granted on May 5, 2021.
- 2. The RSUs convert to Common Stock on a one-for-one basis.
- 3. Reflects shares withheld for taxes payable upon the vesting of RSUs.
- 4. The RSUs vested on April 5, 2024.

/s/ Jennifer Johnson, attorney in 04/09/2024 **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.