FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

		00540	
Washington.	D.C.	20549	

STATEMENT	OF CHAN	IGES IN	BENEFICIAL	<b>OWNERSHIP</b>
_	_			-

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

**OMB APPROVAL** 

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). S	ee Instruction 1	0.																	
ı		Reporting Person*							er or Tr INC [		Symbol T			Check	ationship call app	of Reportir licable)	ng Perso	. ,	
Glickman Matthew									-	-			Director				10% Ov	vner	
(Last) (First) (Middle) 950 TOWER LANE, 12TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 11/12/2024								Office below	er (give title		Other (s below)	specify		
				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable							
(Street)	OMBA CA												'	ine)	Form	filed by One	e Repor	rting Perso	on
FOSTER	CITY CA	A 9	4404												Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Ž	Zip)												1 6130	,,,,			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date		2. Transac Date (Month/Da	Execution Date,				s Acquired (A) or of (D) (Instr. 3, 4 a			nd 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	e		ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock 11/12/2		11/12/2	2024	)24		S		25,036(1)	D	\$22	2.56	118,104		I	D				
Common Stock 11/12/20			2024	024		S		4,964(2)	D	\$22	22.99 113,140		3,140	D					
Common Stock													10	0,000		I	by Trust		
		Tal	ole II -								osed of, o				Owned	d	,		
1. Title of	2.	2 Transaction	24 Da			4115, V		•	_	-	onvertib			·	wise of	9. Number	of 10	•	11. Nature
1. Iftle of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Iransaction Date (Month/Day/Year)				ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Di or (I)	J. wnership orm: irect (D) r Indirect ) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date		Amount or Number of Shares						

## **Explanation of Responses:**

- 1. The shares were sold at prices between \$21.90 to \$22.87. The reporting person will provide upon request to the SEC, the issuer, or security holder of the issuer, full information regarding the number of shares sold at each price.
- 2. The shares were sold at prices between \$22.92 to \$23.06. The reporting person will provide upon request to the SEC, the issuer, or security holder of the issuer, full information regarding the number of shares sold at each price.

By: Gregory Wong For: Matthew Glickman

11/14/2024

\*\* 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.