Deferred

(1)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	-			Washington, D.C. 20549												OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				STA		iled pursua	NT OF CHANGES IN BENEFICIAL OWNER d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940							IP	OMB Estim	Number	: erage burden	3235-0287 0.5	
	transactior contract, ir the purcha of the issu the affirma	box to indicate n was made pu nstruction or wr ase or sale of e er that is intend tive defense co -1(c). See Instr	rsuant to a itten plan for quity securities ded to satisfy onditions of					,											
1. Name and Address of Reporting Person [*] Flint Deborah															5. Relationship of Reporting (Check all applicable) Director Officer (give title			ner	
1	ast) (First) (Middle) 55 S. MINT STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025								Officer (give title Other (specify below) below)						
	(Street) CHARLOTTE NC 28202					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
	City)	(Sta		Zip) ble I - Noi	n-Deri	vative \$	Securitie	s Acc	uired,	Dis	posed o	f, or Ben	eficially (Dwned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/					saction Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transa Code (I 8) Code		4. Securit Disposed	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 Amount (A) or (D) P		5) 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							ecurities alls, warr						ficially Ov ities)	wned					
1. Title of Derivative Security (Instr. 3)		2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transactio Code (Inst B)	n Derivati r. Securiti Acquire or Dispo of (D) (Ir	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)			d Amount of Underlying Security nd 4)		9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac	ve es ally ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)	
1				1						- 1			Amount or		(Instr. 4)				

Compensation (Phantom Commor Stock Shares) Explanation of Responses: 1. Deferred Compensation (Phantom Shares) are allocated based on the price of Common Stock on the contribution date by dividing the dollar amount of the contribution by the price per share of Common Stock. Common Stock prices are based on the mean of the highest and lowest sales price on the last trading day before the contribution or settlement. Phantom Shares are settled in cash based on the price of Common Stock at settlement.

(A)

328.1323

Code v

A⁽²⁾

2. Phantom shares are accrued under the Deferred Compensation Plan for Non-Employee Directors and will be settled in cash based on elections by the Reporting Person as permitted under the Plan. Remarks:

> Su Ping Lu for Deborah Flint ** Signature of Reporting Person

Number of Shares

328.1323

\$225.52

Expiration Date

(2)

Title

Date Exercisable

(2)

(D)

01/06/2025 Date

4.522.7384

D

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).

01/02/2025

** 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.