FORM 4

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

ashington.	DC 2	0549	

STATEMENT	OF	<b>CHANGES</b>	IN	<b>BENEFICIAL</b>	<b>OWNERSHIP</b>

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

	nd Address of d Lynn B.	Reporting Person*				er Name <b>an</b> NA INC		er or Trading GNA ]	Symbol			ck all applicab Director	le)	erson(s) to Issu	wner
(Last)	(F SNA INC.	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/01/2024				2	below)		otner below) ledia Operati	specify		
8350 BROAD STREET, SUITE 2000				4. If Amendment, Date of Original Filed (Month/Day/Year)					- 1	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street)	S V	'A	22102		Rule 10b5-1(c) Transaction Indication						nan One Repor	ing Person			
(City)	(8	State)	(Zip)		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.										
			Table I - Non-l	Deriva	ative	Securitie	s Ac	quired, D	isposed	of, or Be	eneficially	Owned			
1. Title of Security (Instr. 3)  2. Trans Date (Month/		ate	saction 2A. Deemed Execution Date if any (Month/Day/Year)		Date	e, Transaction Dispose Code (Instr.			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5)		Owned (D) or	o. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	/ Amou	Amount (A) or (D)		Reported Transaction (Instr. 3 and			(IIIStr. 4)			
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. Deemed Execution Date, if any (Month/Day/Year)		s. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		)		S Underlying Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form: Direct (D or Indirect (I) (Instr.	Beneficial Ownership t (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Phantom Stock	(1)	02/01/2024		Α		2,463.4921		(2)	(2)	Common Stock	2,463.492	\$15.75	14,571.85	541 D	
Phantom Stock	(1)	02/01/2024		A		400		(3)	(3)	Common Stock	400	\$15.75	2,202.30	)2 I	By spouse

## **Explanation of Responses:**

- $1. \ Each \ share \ of \ phantom \ stock \ is \ the \ economic \ equivalent \ of \ one \ share \ of \ the \ Issuer's \ common \ stock.$
- 2. Each share of phantom stock is payable in cash or stock, at the election of the reporting person, on various dates selected by the reporting person or as otherwise provided in the Issuer's Deferred Compensation Plan.
- 3. Each share of phantom stock is payable in cash or stock, at the election of the reporting person's spouse, on various dates selected by the reporting person's spouse or as otherwise provided in the Issuer's Deferred Compensation Plan.

## Remarks:

/s/ Marc S. Sher, attorney-in-fact 02/02/2024

\*\* Signature of Reporting Person

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.