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PARKER JA Form 4	CQUELINE I	7									
March 05, 20	1 /									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHAN Washington, D.C. 20549							NGE	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed p inue.	F CHAN Section 16 Public Ut	SECURI (a) of the ility Hold	January 31, 2005 Estimated average burden hours per response 0.5							
(Print or Type F	Responses)										
PARKER DAVID RAY Symbo COVI			Symbol COVEN	Name and ANT TRA INC [CV	ANSPOI		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/E 400 BIRMINGHAM HIGHWAY 03/01/2				-	insaction			X DirectorX 10% Owner X Officer (give title Other (specify below) below) CHAIRMAN AND CEO			
CHATTAN	(Street) OOGA, TN 37	7419		ndment, Dat h/Day/Year)	-			6. Individual or Jo Applicable Line) Form filed by 2 _X_ Form filed by 2 Person	One Reporting Pe	erson	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Ye	ear) Executi any	emed on Date, if /Day/Year)	Code	Disposed (Instr. 3,	l (A) c l of (D))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Class A Common Stock	03/01/2018			D <u>(1)</u>	4,264 (<u>1)</u>	D	\$ 0	104,166	D		
Class A Common Stock								2,897,590	D (2)		
Class A Common Stock								26,550 <u>(3)</u>	I	401(k)	
Class B Common								2,350,000	D (2)		

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Stock

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	4. Transactia Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amoun Underl Securit (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address			Relationships							
	Director	10% Owner	Officer	Other						
PARKER DAVID RAY 400 BIRMINGHAM HIGHWAY CHATTANOOGA, TN 37419	Х	Х	CHAIRMA	N AND CEO						
PARKER JACQUELINE F 400 BIRMINGHAM HIGHWAY CHATTANOOGA, TN 37419		Х								
Signatures										
/s/ David R. Parker, by Heidi Hornung-Scherr, attorney-in-fact, pursuant to a POA previously filed with the SEC 03/05/2										
		Date								
/s/ Jacqueline F. Parker, by Heidi Hornung-Scherr, attorney-in-fact, pursuant to a POA previously filed with the SEC										
		Date								

Explanation of Responses:

- * 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).
- (1) Represents the forfeiture of restricted stock originally granted under the 2006 Omnibus Incentive Plan, as amended, due to the issuer not achieving the established performance targets, as certified by the issuer's compensation committee on the transaction date.
- (2) Shares owned jointly by Mr. Parker and his wife, Jacqueline F. Parker, as joint tenants with rights of survivorship.
- The number of shares beneficially owned following the reported transaction is equal to Mr. Parker's February 28, 2018, account balance (3) in the employer stock fund under the issuer's 401(k) plan, divided by the closing price on February 28, 2018. The plan is unitized and as
- (3) in the employer stock fund under the issuer's 401(k) plan, divided by the closing price on February 28, 2018. The plan is unitized and as such does not itself allocate a specific number of shares to each participant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.