

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

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person *					2. Issuer Name <b>and</b> Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer				
				_					~ ~ -			(Check all app	olicable)				
Owen Jeffery	<b>y</b>			L	OL	LAR C	GENERA	AL (	COR	P [ DG	}]						
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							_X_ Director	X_ Director10% Owner				
(Last) (First) (Middle)					,								X Officer (give title below) Other (specify below)				
100 MISSION RIDGE						3/14/2023							ive Office	er			
	(Stree	et)		4	If Ar	nendmei	nt, Date O	rigin	al File	d (MM/DI	D/YYY	Y) 6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)	
GOODLETTSVILLE, TN 37072												X Form filed by	X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(C	ity) (Stat	e) (Zip	p)									roini incu oy	iviore than c	one resporting r	CISOII		
								•	, <u> </u>	•		Beneficially Owne					
1.Title of Security (Instr. 3) 2. Trans. I			2. Trans. Dat		Deemed	3. Trans. Code 4. Securities Acquire					ies Beneficially Owned		6.	7. Nature			
					cution e, if any	(Instr. 8)		or Disposed of (D) (Instr. 3, 4 and 5)		)	Following Reported (Instr. 3 and 4)	Transaction(s)			Beneficial Ownership		
										(A) 01		7				(Instr. 4)	
							Code	V	Amou		Pri	ce			4)		
Common Stock				3/14/2023			A		16114	( <u>1</u> ) A	\$0		61159		D		
	Tabl	le II - Der	ivative S	Securitie	Ben	eficially	Owned (a	e.g.,	puts, c	calls, wa	rrant	s, options, conver	tible secu	ırities)			
			n (Instr. 8		5. Numb Derivativ Acquired Disposed (Instr. 3,	ve Securities I (A) or I of (D)		and Expiration Date Sec Det			e and Amount of ties Underlying ative Security 3 and 4)		9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	V	(A)	(D)	Date Exer	e rcisable	Expiration Date		Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		

## **Explanation of Responses:**

(1) Performance share units ("PSUs") earned from March 17, 2020 & March 15, 2022 grants, as certified by Issuer's Compensation Committee on March 14, 2023. Each PSU represents right to one share of Issuer's common stock. Amount reported includes: (i) 10,446 PSUs earned as a result of Issuer's fiscal years 2020-2022 average adjusted ROIC performance, all of which will become vested & be settled & paid in unrestricted shares of Issuer's common stock on April 1, 2023; and (ii) 5,668 PSUs earned as a result of Issuer's fiscal year 2022 adjusted EBITDA performance, 1,890 of which will become vested & be settled & paid in unrestricted shares of Issuer's common stock on April 1, 2023, & remainder of which is subject to time-vesting requirements (1,889 on each of April 1, 2024 and April 1, 2025) & certain forfeiture & accelerated vesting provisions.

### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Owen Jeffery 100 MISSION RIDGE GOODLETTSVILLE, TN 37072	X		Chief Executive Officer					

### **Signatures**

/s/ Jeffery C. Owen

\*\*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 control number.