FORM 4

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

☐ 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.

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

1. Name and Address of Reporting Person *						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer			
	•												(Check all app	licable)			
VASOS TOD	D J				D	OLI	AR (GENER	AL	COR	P [DG	;]					
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)							X_ Director	X_ Director10% Owner				
(Last)	(1.1151)	(IVII	iddic)				01 2411	1000 114110		(,	_X_ Officer (gir	ve title belov	v) Otl	ner (specify)	below)
100 MISSION RIDGE						4/1/2024							Chief Executi	Chief Executive Officer			
	(Stree	et)			4.]	lf Am	nendme	nt, Date (Origi	nal File	d (MM/DI	D/YYYY	6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)
GOODLETTSVILLE, TN 37072														X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(C	ity) (Stat	te) (Zip	p)										roini med by	wiore man	one resporting r	CISOII	
1.Title of Security					on-Der		-	urities Ac	_				eneficially Owne		ally Owned	6.	7. Nature
(Instr. 3)					Execution Date, if any		(Instr. 8)		Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form: Direct (D)	of Indirect Beneficial Ownership	
								Code	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				4/1/2	2024			F		20,238 (1	D	\$157.35			136,821.4395	D	
	Tab	le II - Der	ivative	e Secu	ırities	Bene	ficially	Owned ((e.g.,	, puts, c	alls, wa	rrants	options, conver	tible secu	ırities)		
			4. Trans. (Instr. 8)	rans. Code ftr. 8) S. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				and Expiration Date Se De			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	V	(A)	(D)	Da Exc	te ercisable	Expiration Date		mount or Number of hares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) Shares of common stock surrendered to the Issuer in payment of taxes in connection with the vesting and payment of a portion of performance share units ("PSUs") granted March 16, 2021 (3,442 shares from the vesting of PSUs earned as a result of the Issuer's fiscal year 2021 adjusted EBITDA performance and 14,163 shares from the vesting of PSUs earned as a result of the Issuer's fiscal years 2021-2023 adjusted ROIC performance) and March 15, 2022 (2,633 shares from the vesting of PSUs earned as a result of the Issuer's fiscal year 2022 adjusted EBITDA performance).

Reporting Owners

Panarting Owner Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
VASOS TODD J										
100 MISSION RIDGE	X		Chief Executive Officer							
GOODLETTSVILLE, TN 37072										

Signatures

/s/ Christine L. Connolly, Attorney-in-Fact

4/3/2024

**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.