

[] 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

1. Name and Address of Reporting Person *					2. I	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
REARDON	KATHLI	EEN A			DO)LI	AR C	SENERA	AL	COF	RP [DC	G]							
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								Director 10% Owner						
()															X_ Officer (give title below) Other (specify below)				
100 MISSION RIDGE						3/9/2021								EVP & Chief People Officer					
	(Stre	et)			4. I	f An	nendme	nt, Date O	rigin	al Fil	ed (MM/D	D/YYY	YY)	6. Individual o	or Joint/G	oup Filing (Check Appl	icable Line)	
GOODLETTSVILLE, TN 37072 (City) (State) (Zip)													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person						
			Table I	- Non	-Deri	ivati	ve Secu	rities Acc	quire	ed, Di	sposed o	f, or	Be	neficially Owne	ed				
1.Title of Security (Instr. 3)				2. Trans. Date				3. Trans. Co (Instr. 8)	de	4. Securities Acqu or Disposed of (D) (Instr. 3, 4 and 5)			Í	5. Amount of Securities Beneficially Own Following Reported Transaction(s) (Instr. 3 and 4)			Ownership of Indire Form: Benefici	Beneficial Ownership	
								Code	V	Amou		Pric	ce				(I) (Instr. 4)	()	
Common Stock 3				3/9/202	3/9/2021			A		1695	<u>1)</u> A	\$0)	4676			D		
	Tab	le II - De	rivative	Securi	ties l	Bene	ficially	Owned (e.g.,	puts,	calls, wa	rran	ts,	options, conver	tible secu	ırities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deen Execution Date, if an	ı (Ins	rans. (str. 8)	5. Code Derivative Acquired Disposed (Instr. 3, 4		e Securities (A) or of (D)		xpiration Date			ities	Underlying Derivative Security		Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	ode	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	An Sha	nount or Number of ares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		

Explanation of Responses:

(1) Performance share units ("PSUs") earned by reporting person from March 21, 2018 & March 17, 2020 grants, as certified by Issuer's Compensation Committee on March 9, 2021. Each PSU represents right to one share of Issuer's common stock. Amount reported includes: (i) 507 PSUs earned as a result of Issuer's fiscal years 2018-2020 average adjusted ROIC performance (2018 grant), all of which will become vested & be settled & paid in unrestricted shares of Issuer's common stock on April 1, 2021; & (ii) 1,188 PSUs earned as a result of Issuer's fiscal year 2020 adjusted EBITDA performance (2020 grant), 396 of which will become vested & be settled & paid in unrestricted shares of Issuer's common stock on April 1, 2021, & remainder of which is subject to time-vesting requirements (396 on each of April 1, 2022 & April 1, 2023) & certain forfeiture & accelerated vesting provisions, & once vested are payable solely in unrestricted shares of Issuer's common stock.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
REARDON KATHLEEN A								
100 MISSION RIDGE			EVP & Chief People Officer					
GOODLETTSVILLE, TN 37072								

Signatures

/s/ Kathleen Reardon

**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.