Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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(0). 0	ee instruction i	··																	
	nd Address of	Reporting Person*									Symbol [CTO]			Check	all app	o of Reportir licable)	ng Pei	()	
Diewe	<u> </u>	<u> </u>												1	Direc			10% Ov	
(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)									Office belov	icer (give title ow)		Other (s below)	specify				
1140 N. WILLIAMSON BLVD.			10/01/2024																
SUITE 1	40																		
				4. If Amendment, Date of Original Filed (Month/Day/Year)							·) 6.	6. Individual or Joint/Group Filing (Check Applicable							
(Street)													Li	ine)					
DAYTO	NA _{Et}	2	211	4										Form filed by One Reporting Person					
BEACH	FL	3	32114	4										Form Perso	filed by Moi on	re tha	in One Repo	orting	
(City)	(St	ate) (Ž	Zip)																
		Table	1 - 1	Non-Deriva	tive S	Secui	rities	Acc	quire	ed, Dis	sposed o	f, or l	3enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, if any (Month/Day/Year		, T	3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (nd 5) Secui Benet Owne		rities Fo eficially (D ed Following Inc		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership				
							ode	V	mount	(A) or (D)	Price		Reported (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		(Insi	tr. 4)	(Instr. 4)		
Common Stock 10/01/202		.4			A		845	A \$19.2		35 ⁽¹⁾ 15,448		5,448		D					
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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		cution Date, ny		ransaction of code (Instr. Derivative		rative rities ired r osed)	Expiration Date (Month/Day/Year)			Amo Secu Unde Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		rice of vative urity tr. 5)	9. Number derivative Securities Becurities Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. These shares were issued to the Reporting Person in lieu of his 3rd quarter 2024 board retainer fee of \$12,500 and committee retainer fees of \$3,750 pursuant to the Issuer's Non-Employee Director Compensation Policy (the "Policy") adopted by the Issuer's board of directors on February 27, 2019 (last amended February 14, 2024). Pursuant to the Policy, the share price utilized to calculate the number of shares issued was the 20-day trailing average closing price as of the last day of the quarter, or \$19.22350.

> /s/ Daniel E. Smith, attorney-10/02/2024 in-fact for Christopher J. Drew

** Signature of Reporting Person

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 Number.