| SEC Form 4 | 4 |
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FORM 4

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

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 Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 1. Name and Add Sandri Fabi | ress of Reporting Pe <u>0</u> | erson [*] | | uer Name and Ticko GRIMS PRIL | | | | | (Chec | ationship of Reportin k all applicable) Director Officer (give title | 10% (| |
|--------------------------------|----------------------------------|--------------------|--|---|------------------------------|---------|--|---------------|------------------|---|---|---|
| (Last) 1770 PROMO | (First) NTORY CIRCLI | (Middle) | | e of Earliest Transa 3/2020 | action (N | /lonth/ | Day/Year) | | | below) President, CE | below |) |
| (Street) | | | 4. If A | mendment, Date of | Origina | I Filec | i (Month/Day/) | 'ear) | 6. Indi Line) | vidual or Joint/Grou | p Filing (Check | Applicable |
| GREELEY | СО | 80634 | | | | | | | X | Form filed by On | e Reporting Per | son |
| (City) | (State) | (Zip) | | | | | | | | Form filed by Mo Person | re than One Re | porting |
| | Ta | able I - Nor | -Derivative S | ecurities Acq | uired, | Dis | posed of, o | or Ben | eficially | / Owned | | |
| 1. Title of Securi | ty (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities / Disposed Of (5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |

| Common | Stock, par | value \$0.01 per | share 12/08/ | 2020 | | | Α | | 70,000 ⁽¹⁾ | A | \ | \$ <mark>0</mark> | 447,354 | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (Ir 8) | tion nstr. | n of Expiration Date // Derivative (Month/Day/Year) Securities Acquired (A) or | | 7. Title Amou Secur Under Deriva Secur 3 and | nt of ities lying ative ity (Instr | 8. Price Derivat Securit (Instr. 5 | ve derivative Securities | e s Illy g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | | Amoun | t | | | | |

Explanation of Responses:

1. Represents grant of restricted stock units subject to continuous employment and compliance with restrictive covenants, vesting ratably over three years on July 1, 2022, July 1, 2023 and ending July 1, 2024

(D)

(A)

Date

Exercisable

Remarks:

| /s/Fa | bio | Sand | ri |
|-------|-----|------|----|

Expiration

Date

or Number

Shares

of

Title

** Signature of Reporting Person Date

01/07/2021

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.

Code v

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.