FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	nd Address of RSON El	Reporting Person*		<u>Top</u>	golf	Call	<u>away</u>	<u>Bra</u>	and	ing Symbol				ationship k all app Direc	licable	eporting P		(s) to Is	
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/15/2023									Office below	cer (give title ow)			Other (specify below)		
2180 RUTHERFORD ROAD			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) CARLSBAD CA 92008															X Form filed by One Reporting F Form filed by More than One Person				
(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication															
					Check t satisfy t	his box he affirn	o indica	ate that efense	t a t	ransaction wa nditions of Rul	s made e 10b5-1	pursuant to L(c). See In	a cont struction	ract, inst on 10.	ruction	or written p	plan th	at is inte	nded to
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date		2. Transaction Date (Month/Day/Yea	Exe r) if a	2A. Deemed Execution Date, if any (Month/Day/Year)			sactio e (Instr		4. Securities Disposed Of and 5)	Acquire (D) (Ins	Acquired (A) or (D) (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	e v		Amount	(A) or (D)	Price	Trai	Reported Transaction(s) (Instr. 3 and 4)		,,		, ,	
Common Stock		05/15/2023	3			S			10,000	D	\$17.93		872,959		I		By WestRiver Management, LLC <sup>(1)</sup>		
Common Stock		05/17/2023			S	S		10,000	D	\$18.12	2 862,959		9	I		By WestRiver Management, LLC <sup>(1)</sup>			
Common Stock													25,243	3	D				
Common Stock													40,476		I		By Anderson Family Investments, LLC <sup>(1)</sup>		
		Tab	le II - Derivativ (e.g., pu							sposed of				Owne	d				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8) 5. Numbe Operival Securit Acquir (A) or Dispos of (D) (Instr. 1 and 5)		er ( tive ities red sed 3, 4	Expirat	tion	ercisable and n Date ay/Year)	Ame Sec Und Der Sec	ount of urities lerlying ivative urity tr. 3 and 4	Der Sec (Ins	Price of ivative curity str. 5)	deriva Secur Bene Owne Follor Repo	ative rities ficially ed wing rted saction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	Date Exercis	sab	Expiratio le Date	on Title	Amoun or Numbe of Shares	1 1							

## **Explanation of Responses:**

1. The Reporting Person is the sole member and sole manager of WestRiver Management, LLC ("WestRiver Management") and the sole manager of Anderson Family Investments, LLC ("AFI"). As a result, the Reporting Person may be deemed to beneficially own the securities held of record by WestRiver Management and AFI. The Reporting Person disclaims beneficial ownership of the securities reported herein, except to the extent of such Reporting Person's pecuniary interest therein.

## Remarks:

/s/ Erik J Anderson

05/17/2023

\*\* 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 Number.