

(Print or Type Responses)

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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nours per response				

#### INITIAL STATEMENT OF 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

/30/2018		1	Reporting Person(	5 TC A					
		4. Relationship of Reportin Issuer (Check all applic			ndment, Date Original th/Day/Year) 018				
	X Officer (give titl below)			Applicable L _X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Beneficially Owned									
2. Amount of Securities Beneficially Owned (Instr. 4)		wned	Form: Direct (D) or Indirect (I)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
23,008 (1)			D						
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  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.  Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
e Exercisable expiration Date Day/Year)  Expiration sable Date	Securities U Security (Instr. 4)	Underlying Derivative	4. Conversion or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)				
	e Exercisable xpiration Date Day/Year)	2. Amount of S Beneficially Or (Instr. 4)  23,008 (1)  curities beneficially owned direct the collection of informat a currently valid OMB col  curities Beneficially Owned (e e Exercisable curities Unit beneficially Owned (e e Exercisable) curities Unit beneficially Owned (e e Exercisable) curities Unit beneficially Owned (e e Exercisable)	Table I - Non-Derivati  2. Amount of Securities Beneficially Owned (Instr. 4)  23,008 (1)  23,008 (1)  curities beneficially owned directly or indirectly. the collection of information contained in the a currently valid OMB control number.  urities Beneficially Owned (e.g., puts, calls, warries Exercisable pairation Date Day/Year)  3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)  Expiration  Expiration  The Amount of Number of	Table I - Non-Derivative Securities I  2. Amount of Securities Beneficially Owned (Instr. 4)  23,008 (1)  23,008 (1)  D  Purities beneficially owned directly or indirectly.  the collection of information contained in this form are not a currently valid OMB control number.  Purities Beneficially Owned (e.g., puts, calls, warrants, options, contained in this form are not a currently valid OMB control number.  Securities Underlying Derivative Security  (Instr. 4)  Expiration  Title Amount or Number of  Expiration  Title Amount or Number of	Table I - Non-Derivative Securities Beneficially O  2. Amount of Securities Beneficially Owned (Instr. 4)  2. Amount of Securities Beneficially Owned (Instr. 5)  2. Amount of Securities Beneficially Owned (Instr. 5)  4. Nature of Indire (Instr. 5)  5. Ownership Form of Securities Underlying Derivative Security (Instr. 4)  5. Ownership Form of Derivative Security (Instr. 4)  6. Ownership Form of Derivative Security (Instr. 4)				

# **Reporting Owners**

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Chandler Elizabeth B 2170 PIEDMONT ROAD, NE ATLANTA, GA 30324			Corporate Secretary	

### **Signatures**

/s/ Elizabeth B. Chandler	01/30/2018
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 5(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).
- This number includes 22,600 in restricted shares. Restricted shares vesting 20% per year following the first anniversary of the grant date for grants awarded from 2014-2018.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.