## SEC Form 5

 $\square$ 

## FORM 5

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

OMB APPROVAL

ĪĒ

OMB Number:	MB Number: 3235-0362						
Estimated average burden							
hours per response:	1.0						

Check	this box if no lo	inger subject										OIVIE		OVAL		
to Sec obligat	tion 16. Form 4 tions may contin tion 1(b).	or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP								OMB Number: 3235-03 Estimated average burden					
Form 3 Holdings Reported.											ho	ours per re	esponse:	1.0		
Form 4	1 Transactions I	Reported.	Filed				e Securities Exch ment Company A									
	nd Address of msen Chri				Trading Symbol		5. Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Own				Owner					
		T GROUP, INC			3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2020							<ul> <li>Officer (give title Other (specif below)</li> <li>below)</li> </ul>				
1675 EA	ST RIVER	4. If Amendr		6. Individual or Joint/Group Filing (Check Applicable												
(Street) EAGLE	ID	ł	33616						Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(Sta	ate) (	Zip)													
		Table	e I - Non-Deriva	ative Secur	ities Ac	quire	ed, Disposed	l of, d	or Benefic	ially Own	ed					
1. Title of Security (Instr. 3) Common Stock Common Stock		Date	2A. Deemed Execution Date if any	Code					ed 5. Amount of Securities Beneficially Owned at end of		6. Ownership Form: Direct		7. Nature of Indirect Beneficial			
			(Month/Day/Yea	ar) 8)		Amount	(A) oi (D)	Price	Uwned a Issuer's I Year (Ins 4)	-iscal	(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)			
		12/18/2020		C	ì	17,200	D	\$0	) 551,133		I	1)	See Footnote <sup>(1)</sup>			
									150,	823	I	)				
		Та	ble II - Derivat (e.g., pu				l, Disposed o ions, conver				d					
1. Title of Derivative     2.     3. Transaction Date     3A. Deemed Execution Date       Security (Instr. 3)     Price of Derivative     Month/Day/Year)     3A. Deemed Execution Date, if any (Month/Day/Year)			4. Transaction Code (Instr. 8)	5. Number of Derivative Securities	Expi	ate Exercisable ar iration Date nth/Day/Year)	Derivative deri Security Sec		umber of 10. vative Owners urities Form: eficially Direct ( or redu		Benefic O) Owners					

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)	) Secu Acqu (A) o Disp of (D		Disposed of (D) Instr. 3, 4		ear) Securities Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

1. Of these shares, 420,862 shares are held by Hobble Creek Investments, LLC, of which Mr. Christensen is the sole member, 126,100 shares are directly owned by The Christopher R. Christensen 2020 Irrevocable Trust and indirectly by Mr. Christensen's spouse, as trustee of the trust, 2,171 shares are held directly by Mr. Christensen's spouse, and 2,000 shares are held by Mr. Christensen's former spouse as custodian for their minor children under the California Uniform Transfers to Minors Act. Mr. Christensen's former spouse holds voting and investment power over the shares held for their children.

## **Remarks:**

/s/ Derek J. Bunker, as attorney-in-fact

02/11/2021

11. Nature of Indirect

\*\* 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.