Edgar Filing: Schechter Joshua - Form 4

Schechter Jo	shua										
Form 4											
May 21, 201	8										
FORM	1 4								OMB AF	PROVAL	
	UNI	TED STATE		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi								Expires:	January 31,		
subject to STATEMENT OF CHA				NGES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005	
Section 16.				SECURITIES					burden hou	0	
Form 4 or									response		
Form 5 obligation		·					•	e Act of 1934,			
may cont	Sechi			•	•			1935 or Section	1		
See Instru	uction	30(1	n) of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Print or Type F	Responses)										
51	1										
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relationship of						5. Relationship of	Reporting Person(s) to				
Schechter Joshua Symbol								Issuer			
•			•	O CORP [VVI]							
(Last) (First) (Middle) 3. Date of			3 Date of	te of Earliest Transaction th/Day/Year)				(Check all applicable)			
								X Director10% Owner			
1850 N. CENTRAL AVE., SUITE 05/20/2				•				Officer (give title Other (specify			
1900								below)	below)		
	(Street)		4. If Ame	endment, Da	te Origina	1		6. Individual or Jo	int/Group Filin	g(Check	
				onth/Day/Year)				Applicable Line)			
``````````````````````````````````````								_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
PHOENIX,	AZ 85004-	4565						Person	lore than One Re	porting	
(City)	(State)	(Zip)				~					
(eny)	(Build)	(Zip)	Tabl	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date 2A. Deemed			3. 4. Securities Acquired				5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year) Execution Date, if any			Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Form: Direct (D) or	Indirect Beneficial	
(1130.3)		(Month	(Instr. 8)				Owned	· /	Ownership		
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price	( ( ( ( ( (			
Common Stock	05/20/201	8		F <u>(1)</u>	742	D	\$ 51.05	26,796	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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

	Relationships					
<b>Reporting Owner Name / Address</b>	Director	10% Owner	Officer	Other		
Schechter Joshua 1850 N. CENTRAL AVE., SUITE 1900 PHOENIX, AZ 85004-4565	X					
Signatures						
By: Irma Villarreal For: Joshua E. Schechter	05/21/2018					
<u>**</u> Signature of Reporting Person		Date				

## **Explanation of Responses:**

- * 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).

(1) Withholding of shares to pay taxes upon vesting of restricted stock granted 5/20/2015. Transaction is exempt under Section 16(b)-3.

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.