## Edgar Filing: Nash Sarah E - Form 4

Nash Sarah F

Form 4										
August 24, 2 FORM	ГЛ						NOLO		OMB AF	PROVAL
	UNITE	D STATES		RITIES A. shington,			NGE C	OMMISSION	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 Eiled pursuant to Section				SECUR	ITIES				Expires: January 20 Estimated average burden hours per response	
obligation may cont <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the	Public U		ling Con	npany	y Act of	e Act of 1934, 1935 or Section 0	1	
(Print or Type F	Responses)									
Nash Sarah E Symbol			r Name <b>and</b> Ticker or Trading KBAUD INC [BLKB]				5. Relationship of Reporting Person(s) to Issuer			
							(Check all applicable)			
(Last) 2000 DANII	(First) EL ISLAND D	(Middle)	3. Date of (Month/D 08/22/24	•	ansaction			X Director Officer (give below)		Owner er (specify
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
CHARLEST	FON, SC 2949	2						Form filed by M Person	ore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	ned n Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securi n(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Common Stock	08/22/2017			Code V S	Amount 1,105	(D) D	Price \$ 84.78	22,272	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)	4. Transacti Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		(Month/Day/Year) tive ties red		Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and (A) (I		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Nash Sarah E 2000 DANIEL ISLAND DRIVE CHARLESTON, SC 29492	Х							
Signatures								
/s/ Donald R. Reynolds, Attorney-in-Fact	08/24/2017							
<pre>Signature of Reporting Person</pre>		Date						
Explanation of Poo	nonc	001						

## 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).

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.