FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|             |      |       |  |

| Check this box if no longer subject |
|-------------------------------------|
| to Section 16. Form 4 or Form 5     |
| obligations may continue. See       |
| Instruction 1(h)                    |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |     |  |  |  |  |  |  |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287    |     |  |  |  |  |  |  |
| Estimated average burden |     |  |  |  |  |  |  |
| hours per response:      | 0.5 |  |  |  |  |  |  |

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

| ı  |   | Reporting Person* Anthony |   |  |   |  |  |      |   |                  | Symbol . [ XRAY    | ]   |  |               | k all app<br>Direc   | licable)<br>tor  | ng Pe       | rson(s) to Is  | vner |
|--|---|---------------------------|---|--|---|--|--|------|---|------------------|--------------------|---|--|---------------|--|--|-------------|----------------|------|
| (Last) C/O DE  | ,   | rst) (M                   | Middle)   |  | 3. Date of Earliest Transaction (Month/Day/Year) 11/29/2023 |  |  |      |   |                  |                    | X   | belov  | ,             | ply (  | Other (s<br>below)<br>Chain Offi                                   | ·           |                |      |
| 13320 BALLANTYNE CORPORATE PLACE                             |   |                           |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                             |   |  |  |      |   |                  |                    | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |               |  |  |             |                |      |
| (Street)   | OTTE NO   | 2                         | 8222  |  |   |  |  |      |   |                  |                    |   |  | X             |  | filed by Mo  |             | oorting Person |      |
| (City)   | (St   | ate) (Z                   | Zip)  |  | Rul   | le 10                                  | )b5-   | 1(c) | Tran  | sac              | tion Indi          | catio   | on   |               |  |  |             |                |      |
|  |   |                           | Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In |  |   |  |  |      |   |                  |                    |   |  |               |  |  |             |                |      |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned    |                           |   |  |   |  |  |      |   |                  |                    |   |  |               |  |  |             |                |      |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day |   |                           | Execution Date,   |  | ate,  | Transaction Disposed O Code (Instr. 5) |  |      | s Acquired (A) or<br>of (D) (Instr. 3, 4 and  |                  |                    | 5. Amo<br>Securi<br>Benefi<br>Owned<br>Report               | ties<br>cially<br>I Following  | Forr<br>(D) ( | m: Direct<br>or Indirect<br>nstr. 4)                                     | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)  |             |                |      |
|  |   |                           |   |  |   |  | Code   | v    | Amount  | (A) or<br>(D) Pr |                    | rice  | Transaction(s)<br>(Instr. 3 and 4)   |               |  |  | (111511. 4) |                |      |
| Common Stock 11/29/2   |   |                           |   | 023  |   |  | F  |      | 10,136(1)   | D                | \$                 | 31.33   | 85,3   | 85,348.569    |  | D  |             |                |      |
| Common Stock 11/29/2   |   |                           |   |  | 2023  |  |  |      | F 275 <sup>(1</sup>   |                  | 275(1)             | D   | \$   | 31.33         | 85,0   | 073.569  |             | D              |      |
|  |   | Tal                       | ble II -  |  |   |  |  |      |   |                  | osed of, convertib |   |  |               | Owne   | d  |             |                |      |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)          | rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any |                           |   | saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |   | Expirat<br>(Month                      | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |      | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amount or Number of Title Shares |                  | De Se (In          | Price of<br>rivative<br>curity<br>str. 5)                   | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y             | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |             |                |      |

## **Explanation of Responses:**

1. Shares withheld to cover taxes related to the vesting of the reporting person's Restricted Stock Units and dividend equivalent units previously reported in Table I.

/s/ Dane Baumgardner,

Attorney-In-Fact for Robert

11/30/2023

Anthony Johnson

\*\* Signature of Reporting Person

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.