SEC For	m 4 FORM	4	UNITED	) STAT	ES S	ECUF	RITIE	S AN	DE	ХСНАМ	NGE C	OMMI	SSION					
		Washington, D.C. 20549												OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See					EMENT OF CHANGES IN BENEFICIAL OWNERSHIP											OMB Number: 3235-0287 Estimated average burden hours per response: 0.5		
	tion 1(b).			Filed						es Exchang npany Act o		934			s per rea	sponse.	0.5	
1. Name and Address of Reporting Person <sup>*</sup> <u>Wells George M.</u> (Last) (First) (Middle)													Relationship of Reporting Person(s) to Issuer       Check all applicable)       Director     10% Owner       X     Officer (give title below)			wner		
5565 GLENRIDGE CONNECTOR STE 450														EVP- COO loint/Group Filing (Check Applicable				
(Street) ATLANTA GA 30342														led by One Reporting Person led by More than One Reporting				
(City)       (State)       (Zip)       Rule 10b5-1(c) Transaction Indication            Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												to satisfy						
		Та	ble I - Nor	n-Derivat	ive Se	ecuritie	es Acc	quired,	Dis	posed of	f, or Bei	neficially	y Owned					
Da				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		d (A) or r. 3, 4 and s	) or 4 and 5) Securities Beneficial Owned Fo Reported		Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount (A) or (D)		Price	Transacti	<ul> <li>Reported</li> <li>Transaction(s)</li> <li>(Instr. 3 and 4)</li> </ul>			(Instr. 4)	
Common Stock				02/17/2	)2/17/2024					3,061 A		(1)(2)	98,641			D		
Common Stock 02/				02/17/2	024			F		1,473 <sup>(2)</sup> D		\$6.77	97,	97,168		D		
			Table II - I							osed of, onvertib			Owned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate, Tran Code	saction (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Ye		te	of Securi Underlyir	g Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact	ve es ally ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
				Code	• V	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				

## Explanation of Responses:

\$0<sup>(1)</sup>

1. Each deferred stock unit represents a contingent right to receive one share of PDM common stock. Deferred stock units may be settled in cash or common stock at PDM's election.

41,985

2. On February 17, 2021, the reporting person was granted 12,245 restricted stock units, vesting in four equal, annual installments beginning on the grant date. On February 17, 2024, the final 25% of the grant vested (3,061 shares) and were settled in PDM common stock. In connection with this vesting, 1,473 shares were forfeited by the employee and delivered to PDM to satisfy tax withholding obligations.

(3)

3. On February 20, 2024, the reporting person was granted 41,985 deferred stock units, vesting in four equal, annual installments beginning on the anniversary of the grant date.

Remarks:

Restricted Stock Units

/s/ Laura P. Moon as Attorney-02/21/2024 in-Fact for George M. Wells

41,985

\$<mark>0</mark>

Common Stock

(3)

\*\* Signature of Reporting Person Date

77,342

D

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).

02/20/2024

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.