

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

OMB APPROVAL					
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nours per respons	e. 0.5				

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)	(Print or Type Resp	onses)										
A. Relationship of Reporting Person(s) to Sure	1 0			Statement (Month/Day/Year)								
WASHINGTON, DC 20006    Table I - Non-Derivative Securities Beneficially Owned (Instr. 4)   SEC 1473 (7-0)   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 Beneficially Owned (Instr. 4)   SEC 1473 (7-0)   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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)   Securities Security (Instr. 5)   Securities Security (Instr. 5)   Securities Securities Securities Securities Securities Securities Securities Security Securities Securities Securities Securities Securities Security Securities Securities Securities Securities Securities Security Securities Securities Securities Securities Securities Securities Security Securities Secur	(Last) (First) (Middle)							Issuer				
1. Title of Security (Instr. 4)  2. Amount of Securities Beneficially Owned (Instr. 4)  2. Amount of Securities Beneficially Owned (Instr. 5)  Common Stock  28,406  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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date Security (Instr. 4)  Date Expiration Date Security (Instr. 4)  Date Expiration Date Security (Instr. 4)  Amount or Number of Title Amount or Number of Title Security (Instr. 4)  Amount or Number of Title Security (Instr. 5)  4. Nature of Indirect Beneficial Ownership (Instr. 5)  4. Conversion of Conversion Ownership Ownership Ownership (Instr. 5)  6. Nature of Indirect Beneficial Ownership Ownership (Instr. 5)  Title of Derivative Security (Instr. 5)  Title of Derivative Security (Instr. 5)  Amount or Number of Title Ownership Security (Instr. 5)	WASHINGTO	, ,						Director  X Officer (give title below)  Director  Other (specify below)			Applicable Line) _X_ Form filed by One Reporting Person	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.    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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)   Table II - Derivative Security   2. Date Exercisable and Expiration Date (Month/Day/Year)   3. Title and Amount of Securities Underlying Derivative Security   4. Conversion or Exercise Price of Derivative Security: Direct (Instr. 4)   Date Expiration Date (Instr. 5)   Date Expiration Date (Instr. 4)   Date Expiration Date (Instr. 5)   Date Expiration Date (Instr. 4)   Date Expiration Date (Instr. 4)   Date Expiration Date (Instr. 4)   Date Expiration Date (Instr. 5)   Date Expiration Date (Instr. 4)   Date Expiration Date (Instr. 5)   Date Expiration Date (Instr. 5)   Date Expiration Date (Instr. 4)   Date Expiration Date (Instr. 5)   Date Exp	(City)	(State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned							
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  1. Title of Derivative Security  2. Date Exercisable and Expiration Date (Month/Day/Year)  3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)  Date Expiration Title Amount or Number of Title Collection of information contained in this form are not required to respond  4. Conversion or Exercise Form of Derivative Security: Direct Security: Direct (I) or Indirect (I) or Indirect (I)	(Instr. 4) Ben			eneficially Owned Instr. 4)		Form: Direct (D) or Indirect (I)						
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(Instr. 4)  and Expiration Date (Month/Day/Year)  and Expiration Date (Month/Day/Year)  and Expiration Date (Month/Day/Year)  Security (Instr. 4)  Date Expiration Ferrigable Date Title of Date (Instr. 5)  Amount or Number of Comparison (Instr. 5)  Title of Derivative Security (Instr. 5)  Title of Date (Instr. 4)  Amount or Number of (Instr. 5)	Reminder: Report	Persons unless th	who respond ne form displa	I to the c ays a cur	ollection rently val	of info	ormatio IB cont	on contained in t rol number.		·		
Date Expiration Title Amount or Number of (I)		ve Security	an			Securities Underlying Derivative Security		or Exercise Price of Derivative	Form of Derivative Security: Direct			
						Title Tillou		nt or Number of	Security	(I)		

### **Reporting Owners**

Deporting Owner Name /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Gerock Susan Lilly 1775 EYE STREET SUITE 1000 WASHINGTON, DC 20006			SVP & CIO			

# **Signatures**

By: W. Drew Hammond For: Susan L. Gerock	02/11/2022
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.