FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

OMB APPROVAL OMB Number: 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 | | |
|-------|--|----------------------|-------------------------------|
| | 2. Issuer Name and Ticker or Trading Symbol | 5. Relationship of F | Reporting Person(s) to Issuer |

| | nd Address of Ronald | Reporting Person* $\frac{1}{4}$. | | | | | | | ker or Tra | | | | | | ck all ap | plicable) | g Person(s) to | ssuer |
|---|-------------------------|-----------------------------------|--------------------------|------------------------------------|-------|---|---------|---|------------------|--|---|---|---|---|---|----------------------------------|---|--|
| (Last) 20 S. WA | (Fi | rst) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2017 | | | | | | | | _ | er (give title | | (specify | |
| (Street) CHICAG | | | 50606 Zip) | | 4. If | f Ame | endment | , Date o | of Origina | l Filed | d (Month/Da | ay/Year) | | 6. Ind Line) | Forr | n filed by One n filed by Mor | Filing (Check And Per Reporting Per re than One Re | son |
| | | Tabl | e I - No | n-Deriv | ative | Se | curitie | s Ac | quired | , Dis | sposed o | f, or I | 3ene | eficially | / Own | ed | | |
| 1. Title of Security (Instr. 3) | | | Date (Month/Day/Year) | | r) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4) | | A) or 3, 4 and 5 | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | v | Amount (A) or (D) | | Price | Trans | action(s) 3 and 4) | | (Instr. 4) | | |
| Common Stock Class A | | | 02/24 | /2017 | 2017 | | S | | 500 D \$1 | | \$1 <mark>22.1</mark> 1 | - | 3,500 | D | | | | |
| | | Та | | | | | | | | | osed of, onvertib | | | | wned | 1 | | |
| Derivative Conversion Date Security or Exercise (Month/Day/Year) if | | | | ned 4. Transactic Code (Inst | | | on of | | Expiration | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (In | Price of rivative curity str. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amo or Nun of Sha | . | | | | |

Explanation of Responses:

By: Margaret Austin Wright For: Ronald A. Pankau

02/27/2017

** Signature of Reporting Person

Date

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.