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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL

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

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

STATEMENT OF CHANGES IN 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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Nuckols Tho	mas Mar	tin		DI	XI	E GRO	OUP IN	IC [DX	YN]			(CI		oncaole)	100			
(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)									Director 10% Owner X Officer (give title below) Other (specify below)					
475 REED R	OAD						3/1	2/20	024					ecutive Vi		· —	ner (specify	below)	
	(Stree	et)		4. 1	f Ar	nendme	nt, Date (Origir	nal Fi	led (MM	/DD	O/YYYY)	6. I	ndividual	or Joint/G	roup Filing	(Check Appl	icable Line)	
DALTON, GA 30720														X Form filed by One Reporting Person					
(City) (State) (Zip)														Form filed by More than One Reporting Person					
			Table I -	- Non-Der	ivat	tive Secu	ırities Ac	equir	ed, D	isposed	l of.	, or Be	nefici	ially Owne	ed				
1. Title of Security (Instr. 3)				Trans. Date	Exec	Deemed cution e, if any	3. Trans. C (Instr. 8)	ode	or Disposed of (D)			Following Reported Transaction(s) (Instr. 3 and 4) Ownership Form: Beneficia Direct (D) Ownersh				Beneficial Ownership			
							Code	V	Amo) or D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock, \$3 par value 3/12/				3/12/2024			J ⁽¹⁾				A	\$0	120,827			D			
Common Stock, \$3 par value 3/12/				3/12/2024			A		50,73	8 (2)	A	\$0.61	171,565			D			
Common Stock, \$3 par value				3/12/2024			F		7,00	2 (3)	D	\$0.61	164,563			D			
	Tab	le II - Der	ivative S	ecurities l	Ben	eficially	Owned	(e.g.,	puts.	, calls, v	war	rrants,	optio	ons, conver	tible secu	ırities)			
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deeme Execution Date, if any	(Instr. 8)	s. Code 5. Numbe Derivative Acquired Disposed (Instr. 3, 4		e Securities (A) or of (D)		te Exercisable Expiration Date		S	7. Title and Amor Securities Under Derivative Secur (Instr. 3 and 4)		ying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Code	V	Date Expiration Title Num		Amount or Number of Shares	Reported Transaction(s) (Instr. 4)		or Indirect								
Employee Stock Option (right to buy)	\$1							5/25/	2025	5/25/202		Employee Option (r. buy)	ight to	25,000		25,000	D		

Explanation of Responses:

- (1) Shares of Common Stock held as of March 11, 2024.
- (2) Represents an award of restricted stock consisting of 13,000 Career shares and 37,738 Long-Term Incentive Plan shares.
- (3) Represents shares surrendered to Company to satisfy income tax withholding requirements with respect to vesting of an outstanding award of restricted stock.

Reporting Owners

Paperting Owner Name / Address	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
Nuckols Thomas Martin										
475 REED ROAD			Executive Vice President							
DALTON, GA 30720										

Signatures

/s/ John F. Henry, Jr., by Power of Attorney for Thomas Martin Nuckols

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 control number.