| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPRO | JVAL |
|------------------------|-----------|
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| hours per respo | onse: | 0.5 |
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| | | |

| 1. Name and Address of Reporting Person [*] Hilferty Daniel J III | | | | er Name and Ticke JA AMERIC | 0 | · | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|--|---------------------|----------|------------------------|---------------------------------------|-------------------|--|--|--|------------------------------|--------------------------|--|
| (Last) 762 W LANCAS | (First) STER AVE | (Middle) | 3. Date 09/30 | e of Earliest Transa 1/2019 | ction (Month/ | Day/Year) | | Officer (give title below) | Other below | (specify) | |
| | | | 4. If Ar | mendment, Date of | Original Filed | (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group | Filing (Check A | Applicable | |
| (Street) BRYN MAWR | РА | 19010 | | | | | X | Form filed by One Form filed by Mor | | | |
| (City) | (State) | (Zip) | | | | | | Person | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| 1. Title of Security (| (Instr. 3) | | 2. Transaction Date | 2A. Deemed Execution Date, | 3. Transaction | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect | |

| | (Month/Day/Year) | if any (Month/Day/Year) | | Code (Instr. | | | | Beneficially Owned Following Reported | (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|--|------------------|----------------------------|------|--------------|--------|---------------|----------|---|----------------|---------------------------------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 09/30/2019 | | A | | 502 | A | \$44.855 | 10,374 | D | |
| Table II. Derivative Converties Assuring Disposed of an Densfieldu Owned | | | | | | | | | | |

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) of Dispo of (D) (Instr | of Expiratio | | Expiration Date (Month/Day/Year) vurites vurites vor posed D) 0) tr. 3, 4 | | | Amount of Securities | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|--------------|---------------------|---|-------|--|-------------------------|--|---|--|----------------------------------|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

Brian J Dingerdissen, attorneyin-fact for Mr. Hilferty <u>10/02/2019</u>

** 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.