SEC Form 4

FORM 4

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

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

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

| 1. Name and Ada Gaumond 1 | dress of Reporting Mark E. | Person* | | ier Name and Ticke z Allen Hami | | Symbol ling Corp [BAH | | | | Owner |
|--|-------------------------------|---------------|----------------|---|---|--|-------------------|---|---|---|
| (Last) (First) (Middle) 8283 GREENSBORO DRIVE | | | | e of Earliest Transa 2/2022 | ction (Month/ | Day/Year) | | Officer (give title below) | below | specify |
| (Street) | | | 4. If A | mendment, Date of | Original Filed | (Month/Day/Year) | 6. Indiv Line) | <i>i</i> idual or Joint/Grou | p Filing (Check | Applicable |
| MCLEAN | VA | 22102 | | | | | X | Form filed by On | e Reporting Per | son |
| (City) | (State) | (Zip) | | | | | | Form filed by Mo Person | re than One Re | porting |
| | | Table I - Nor | n-Derivative S | ecurities Acqu | uired, Disp | oosed of, or Benef | icially | Owned | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A Disposed Of (D) (Instr. 3 5) | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |

| | (monunbuy) (cur) | (Month/Day/Year) | 8) | | | | | | Ownership (Instr. 4) | |
|----------------------|------------------|------------------|------|---|----------------------|---------------|-------------------|------------------------------------|-------------------------|-----------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150. 4) |
| Class A Common Stock | 08/02/2022 | | Α | | 2,395 ⁽¹⁾ | Α | \$ <mark>0</mark> | 56,717 ⁽²⁾ | D | |

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) o Dispo of (D (Insti | Derivative (Month/Day/Year) Securities Acquired (A) or Disposed | | ate | d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|---|---------------------|--------------------|---|--|---|--|--|
| | | | | Code | v | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | L |

Explanation of Responses:

1. Consists of shares of Class A restricted common stock.

2. Includes shares of Class A restricted common stock.

Remarks:

By: /s/ Lubna Malik, as Attorney-in-Fact for Mark

08/04/2022

Gaumond ** 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.