FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 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).

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 Addr DAHL RICH | ess of Reporting Per <mark>IARD J</mark> | rson [*] | | | uer Name and Tick eEquity, Inc | 0 | Symbol | | tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner | | | |
|--|---|-------------------|-------|---|--|---|------------------|---|--|---|----------|--|
| (Last) | , , , , , , | | | | te of Earliest Trans 4/2016 | action (Month/ | Day/Year) | | Officer (give title below) | | (specify | |
| 450 NORTH BRAND BOULEVARD, 7TH FLOOR | | | | 4. If A | Amendment, Date c | of Original Filed | (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | | | | | | | | X | Form filed by On | e Reporting Pe | rson | |
| GLENDALE | CA | 91203 | | | | | | | Form filed by Mo Person | re than One Re | porting | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day) | | | Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (Disposed Of (D) (Instr. and 5) | | 5. Amount of Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership | | |

| | (Month/Day/Year) | 8) | | | | - | Beneficially Owned Following | (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|--------------|------------------|------|---|--------|---------------|--------|--|--------------------------------------|---------------------------------------|
| | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (1150.4) | (1150. 4) |
| COMMON STOCK | 12/14/2016 | G | v | 400 | D | \$0.00 | 45,165 | Ι | BY TRUST ⁽¹⁾ |
| COMMON STOCK | 12/14/2016 | G | v | 400 | D | \$0.00 | 44,765 | Ι | BY TRUST ⁽¹⁾ |
| COMMON STOCK | 12/14/2016 | G | v | 400 | D | \$0.00 | 44,365 | Ι | BY TRUST ⁽¹⁾ |

| 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 | | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. 5. Numbe Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | vative rities ired r osed) c. 3, 4 | 6. Date Exerc Expiration D (Month/Day/ | 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) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Shares held by Richard James Dahl as trustee for the Richard J. Dahl Revocable Living Trust dated 01/20/1995.

Remarks:

/s/ Joanne Wu as attorney-infact for Richard J. Dahl <u>12/15</u>

12/15/2016

** 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.