| Colella Giov Form 5 | vanni M. | | | | | | | | | |
|--|---|---|--|----------|--------------------------------------|---|--|---|--|--|
| February 12 | , 2018 | | | | | | | | | |
| FORM 5 | | | | | | | | | | |
| | | | | | COMMISSION | OMB Number: | 3235-0362 | | | |
| Check thi no longer | | Wa | ashington, D | .C. 2054 | | Expires: | January 31, 2005 | | | |
| to Sectior Form 4 or 5 obligati may conti <i>See</i> Instru | r Form ANN ons inue. action | OWNE | CATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | average rs per 1.0 | | |
| 1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Form 3 HoldingsSection 17(a) of the Public Utility Holding Company Act of 1935 or SectionReported30(h) of the Investment Company Act of 1940TransactionsReported | | | | | | | | | | |
| 1. Name and A Colella Gio | Address of Reporting I wanni M. | | 2. Issuer Name and Ticker or Trading Symbol | | | 5. Relationship of Issuer | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | CAST [CSLT | LIGHT HEA '] | LTH, IN | C. | (Check | (Check all applicable) | | | |
| (Last) | (First) (M | (Month/ | 3. Statement for Issuer's Fiscal Year (Month/Day/Year) | | | Director10% Owner Officer (give titleXOther (specify below)below) | | | | |
| 301 MISSI | ON STREET, APT | 12/31/ Г. 48С | 2017 | | | | rector & Exec. | Chair | | |
| | (Street) | 4. If Am | endment, Date onth/Day/Year) | | 6. Individual or Jo | 6. Individual or Joint/Group Reporting | | | | |
| (check applicable line) | | | | | |) | | | | |
| SAN FRANCISCO, Â CAÂ 94105 _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person | | | | | | | | | | |
| (City) | (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code | | ties Acquit sposed of 4 and 5) | Securities Beneficially Owned at end of Issuer's | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Amount | (A) or (D) Pr | Fiscal Year (Instr. 3 and 4) rice | | | | |
| Class B Common Stock | 08/08/2017 | Â | G | 54,224 | D \$ | 0 0 | Ι | By living trust (1) | | |
| Class B Common Stock | 08/30/2017 | Â | G | 2,667 | D \$ | 0 0 | I | By living trust (1) | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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. SEC 2270 (9-02)

1

Edgar Filing: Colella Giovanni M. - Form 5

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. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. of D So B O E I S Fi (I |
|---|---|---|---|---|---|---------------------|--------------------|-------|--|---|--|
| | | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------------------------------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Colella Giovanni M. 301 MISSION STREET, APT. 48C SAN FRANCISCO, CA 94105 | Â | Â | Â | former Director & Exec. Chair | | |
| Signatures | | | | | | |

/s/ Giovanni M. 02/12/2018 Colella **Signature of Date Reporting Person

Explanation of Responses:

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).

(1) Reporting Person serves as a co-trustee.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.