FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

washington, D.C. 20049	OMB APPROVA				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	323			

OMB Number:	3235-0287
Estimated average bur	den
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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

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*  Retirement Plan of Carilion Clinic															Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner						
(Last) (First) (Middle) 213 SOUTH JEFFERSON STREET						3. Date of Earliest Transaction (Month/Day/Year) 09/14/2018										Office below	er (give title w)		Other below)	(specify )	
SUITE 807					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	KE VA		24011										X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(St	ate) (	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)					Execution Date,		Date,	Transaction Disposed Of (I Code (Instr.			es Acquired (A) o Of (D) (Instr. 3, 4 a			4 and 5) Sec Ben Owr		curities I neficially		Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (1	A) or D)	Price		Transaction(s) (Instr. 3 and 4)				(	
Common Stock, par value \$0.01 per share 09/14/20					2018				P		181,529.	76	A	\$15	.02	990,	720.32(1)		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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			snsaction de (Instr. Servicities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amour or Numbe of Title Shares		nstr. 3 nount mber	nt Pr				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

## **Explanation of Responses:**

1. The number of shares includes shares acquired pursuant to the Runway Growth Credit Fund Inc. automatic dividend reinvestment plan ("DRIP"), exempt under Rule 16a-11.

Thomas B. Raterman is signing on behalf of Retirement Plan of Carilion Clinic pursuant to the power of attorney dated April 21, 2017, which was previously filed with the Securities and Exchange Commission as an exhibit to the Form 3 filed by Retirement Plan of Carilion Clinic on April 21, 2017.

> /s/ Thomas B. Raterman, on behalf of Retirement Plan of 09/18/2018

Carilion Clinic \*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.