FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549

STATEMENT	OF CHAN	IGES IN BEI	NEFICIAL C	<b>WNERSHIP</b>

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours nor reenence:	0.5								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

							. ,				Company Act	01 1840							
	nd Address o r <u>Michae</u>	f Reporting Person <sup>*</sup>					r Name <b>ar</b> <mark>Kchang</mark>				g Symbol [nc. [ AVD	x ]		Relationship on eck all applic X Director	able) r		10% O	wner	
	DXCHAN	First) GE HOLDINGS	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/06/2024								X Officer (give title Other (specify below)  Chief Executive Officer					
1210 AV	IDXCHAN	IGE LANE			_ 4.1	lf Am	endment,	Date	of Origi	nal Fil	ed (Month/Da	y/Year)	6. I Lin	•					
(Street)	OTTE N	IC	28206										X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(5	State)	(Zip)		R	Rule 10b5-1(c) Transaction Indication													
						Che the	ck this box affirmative	to inc defen	licate tha	at a tra	nsaction was m f Rule 10b5-1(c	ade pursua ). See Inst	ant to a contr ruction 10.	act, instruction	or writt	en plan that	is intended	to satisfy	
		Та	ble I - I	Non-Der	ivativ	e Se	ecuritie	s A	cquire	ed, D	isposed o	f, or Be	eneficial	ly Owned					
1. Title of S	Security (Ins	tr. 3)		2. Transaction Date (Month/Day/Ye		Execution Da  'ear) if any		cution Date,		ction Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Follo Reported		Form: Direc (D) or Indire		lature of irect neficial nership itr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transaction( (Instr. 3 and			(,,,,	<del>1</del> )	
Common	Stock			03/06/	2024	╀			A		391,905(1)	A	\$0.00	10,575,8	346	D			
Common	Stock													297,02	6	I	Ch	By MP Charitable Trust	
Common	Stock													503,21	0	I	By Cindy Praeger		
Common	Common Stock										660		27 I		Pra Cii Pra Joi Te Rig	Michael neger and ndy neger, nt nants with ght of rvivorship			
Common	on Stock												1,888,6	52	I	an	Green d Gold 14 GRAT		
Common Stock												1,328,276		I and		Green d Gold 15 GRAT			
			Table								sposed of, , convertil			Owned					
Derivative   Conversion   Date		3. Transaction Date (Month/Day/Year)	Transaction 3A. Deemed Execution Date		ned 4. n Date, Transact Code (Ins		5. Number of Derivative		6. Date Exerc Expiration D (Month/Day/		cisable and	7. Title and of Securion Underlying	nd Amount ities ng	8. Price of Derivative Security (Instr. 5)	deriv Secu Bene Own Follo Repo	ative rities ficially ed wing	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Employee Stock Option (right to	\$6.053	03/06/2024			Code	v	(A) 346,935	(D)				Common	of Shares		3-	46,935	D	<u> </u>	

1. Represents restricted stock units ("RSUs") which will vest 25% on the first anniversary of the vesting commencement date and quarterly thereafter over 12 quarters. The vesting commencement date was February 15, 2024. Each RSU represents a contingent right to receive one share of common stock of the Issuer and the RSUs have no expiration date.

2. The option vests 25% on the first anniversary of the vesting commencement date and quarterly thereafter over 12 quarters. The vesting commencement date was February 15, 2024.

/s/ Ryan Stahl, Attorney-in-Fact 03/08/2024 for Michael Praeger

Date

\*\* Signature of Reporting Person

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.