| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number: | 3235-0287 |
|----------------------|-----------|
| Estimated average bu | rden |
| hours per response: | 0.5 |

| to Section 16 | ox if no longer subject Form 4 or Form 5 | ATEMENT | OF CHANGE | ES IN | BE | NEFICIA | AL O | WNERS | | 3 Number: mated average bur | 3235-0287 den | |
|--|---|----------|--|---|---|---------|------------------------------|-----------------|---|---|---|---|
| Obligations m Instruction 1(| ay continue. <i>See</i> b). | | rsuant to Section 16(a r Section 30(h) of the | | | 1934 | hour | s per response: | 0.5 | | | |
| 1. Name and Address of Reporting Person [*] Marcolini John F. | | | | Issuer Name and Tio <u>FRON, INC.</u> [| | | g Symbol | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Cofficer (give title Other (specify | | | |
| (Last) 2111 N. MOL | (First) TER ROAD | (Middle) | | Date of Earliest Tran 7/05/2022 | isaction | (Mont | h/Day/Year) | | SVP, Networked Solutions | | | |
| (Street) LIBERTY LAKE | WA | 99019 | 4. | If Amendment, Date | of Origi | nal Fil | ed (Month/Da | ay/Year) | 6. Indiv Line) X | | up Filing (Check ne Reporting Per ore than One Re | rson |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | |
| | | | 2. Transaction Date (Month/Day/Yea | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Disposed Of | ' (D) (Inst | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | |
| Common Stock 07/ | | | | | s | | 199 | | \$45 9344 | 8 4 9 8 | | 1 |

| Common Stock | | | 07/05/2 |)22 | | | | S | 199 | D | \$45.93 | 344 | 8,498 | D | |
|--|--|---|---------|-----------------------------------|---|--|--|---------------------|---|-------|---|--|---|--|--|
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
| Derivative Conversion Date Exec Security or Exercise (Month/Day/Year) if an | | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. | | mber vative rities lired r osed) r. 3, 4 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 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) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

/s/ Christopher E. Ware,

attorney-in-fact

07/06/2022

** 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.