## Edgar Filing: Sanko Carl - Form 4

Sanko Carl													
Form 4													
June 21, 201	8												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	PROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287			
Check this box								Expires:	January 31,				
	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWN						NERSHIP OF	Estimated average					
5	Section 16. SECURITIES									burden hours per			
	Form 4 or								response 0				
Form 5 obligation	<b>^</b>							•	e Act of 1934,				
may cont				•		•			1935 or Section	n			
See Instru		30(h)	of the In	vestme	ent (	Company	Act	of 194	0				
1(b).													
(Print or Type I	Responses)												
(I fine of Type I	(coponises)												
1. Name and A	ddress of Reporti	ng Person *	2 Issuer	r Name s	and	Ticker or T	radino		5. Relationship of	Reporting Pers	son(s) to		
Sanko Carl Symbol				er Name and Ticker or Trading					Issuer				
				CONE	200	5. INC. [0	RW	CI					
			W CONDOS, INC. [GRWC] e of Earliest Transaction					(Check all applicable)					
(Last)	(First)	(Middle)				ansaction			X Director	100	Owner		
			(Month/D 06/13/2	-	)				_X_Director10% Owner Officer (give titleOther (specify				
			00/15/2	010					below)	below)	•		
(Street) 4. If Ame			4. If Ame	Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(Mor	nth/Day/Y	(ear)				Applicable Line)				
									_X_Form filed by C Form filed by M	1 0			
LAS VEGA	S, NV 89135								Person	Iore mail One Ke	porting		
(City)	(State)	(Zip)	Tabl	e I - No	n.D	erivative S	ecuriti	ies Acai	uired, Disposed of	or Beneficial	lv Owned		
1 The of	2 T	No.44 24 Dec.						-			-		
1.Title of Security	2. Transaction E (Month/Day/Ye		med on Date, if	3. Transa	ctio	4. Securitie			5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	(intendity Duy) 10	any	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)						Beneficially		Beneficial		
		(Month/	/Day/Year) (Instr. 8)						Owned	Indirect (I)	Ownership		
									Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				<b>a</b> 1	* 7		or	р.	(Instr. 3 and 4)				
Common				Code	V	Amount	(D)	Price	,				
Common	06/13/2018			А		164,894	А	<u>(1)</u>	7,534,048	D			
stock													

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transact	5. ionNumb		6. Date Exercised Expiration D		7. Title Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securi Acqui (A) or Dispo of (D) (Instr.	•		Year)	Under Securi (Instr.		Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (	· /	Date Exercisable	Expiration Date		Amount or Number of Shares		

## **Reporting Owners**

Reporting Person

Reporting Owner Name / Addre	ess	Relationships								
	Director	10% Owner	Officer	Other						
Sanko Carl 4824 DENARO DRIVE LAS VEGAS, NV 89135	Х									
Signatures										
/s/ Carl Sanko	06/21/2018									
<u>**</u> Signature of	Date									

## **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) Shares issued for services as member of Board of Directors for period ending 9/30/2018.

Note: File three copies of this Form, one of which must be manually signed. If space 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.