FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Washington, B.G. 20040 |
|-------------------|--|
| | |
| | |
| longer subject to | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

> X 10% Owner Other (specify below)

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting

6. Ownership

Form: Direct

(D) or Indirect (I) (Instr. 4)

Ι

10. Ownership

Direct (D)

or Indirect (I) (Instr. 4)

Form:

7. Nature

of Indirect Beneficial Ownership

(Instr. 4)

See note

below⁽¹⁾ See note

below⁽¹⁾ See note

below⁽²⁾

11. Nature of Indirect

Beneficial

Ownership (Instr. 4)

Director

5. Amount of

Reported Transaction(s) (Instr. 3 and 4)

Securities Beneficially Owned Following

7,640,307

7,628,907

29,000,000

9. Number of derivative

Securities
Beneficially
Owned
Following
Reported

Transaction(s) (Instr. 4)

Officer (give title below)

| | tion 1(b). | nue. See | | File | or S | Section | 30(h) | of the I | nvestme | ent Co | ties Exchanç mpany Act o | | | 934 | | | _ |
|---|--|---|---|-------------------------------|------------------------------|---------------------|---------------------------------------|----------------------|----------------------------------|---------|-----------------------------|-------------------------------|----------------------|--------|-------------------|---|--|
| | | Reporting Person* <u>Cast, LLC</u> | | | LIC | | | | er or Tra TEC | | Symbol OLOGIE | ES II | <u>NC</u> | | | ationship all app Direc Office | lic to: |
| (Last) 5641 NC | (Fii ORTH BRO | · · | Middle) | | | ate of 27/20 | | st Trans | action (N | Month | /Day/Year) | | | | | below | |
| (Street) | R CO |) { | 30216 | | 4. If | Amen | dment, | , Date o | of Origina | al File | d (Month/Da | y/Yea | r) | | 6. Indiv Line) | ridual or Form Form Perso | i fil |
| (City) | (St | | Zip) | | <u> </u> | | | | | | | | | | | | |
| 1. Title of | Security (Inst | | ie i - No | 2. Transa Date (Month/D | ction | 2A. Exe if ar | Deeme | ed | 3. Transa Code (8) | ction | 4. Securitie Disposed C | s Acq | uired | (A) or | | 5. Amo Securit Benefic | ur tie cia |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | : | Report Transa (Instr. : | cti |
| Common | Stock | | | 02/27 | /2014 | 0: | 2/27/2 | 2014 | S | | 230,000 | | D | \$0.3 | 3002 | 7,6 | 4(|
| Common | Stock | | | 02/28 | /2014 | 0: | 2/28/2 | 2014 | S | | 11,400 | | D | \$(|).3 | 7,6 | 28 |
| Common | Stock | | | | | | | | | | | | | | | 29,0 |)0 |
| | | Ta | able II - | | | | | | | | osed of, osonvertib | | | | | wned | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative | 3. Transaction Date (Month/Day/Year) | 3A. Deer Execution if any (Month/I | | 4. Transa Code (8) | | of Deriv Secu Acqu (A) or | rities iired r | 6. Date Expirati (Month/ | on Da | | Amor Secu Unde Deriv | | f g | Deri Seci | vative urity tr. 5) | 9. de Se |
| | Security | | | | | | of (D) (Instr and 5 |) . 3, 4 | | | | anu - | ., | | | | (|
| | Security | | | | Code | v | of (D) (Instr |) . 3, 4 | Date Exercisa | able | Expiration Date | Title | An or Nu of | ımber | - | | • |
| | nd Address of | Reporting Person* <u>Cast</u> , <u>LLC</u> | | | Code | v | of (D) (Instr and 5 |) :. 3, 4 b) | | able | | | An or Nu of | ımber | | | _ |
| Visser (Last) | nd Address of Precision | Cast, LLC (First) | (Mid | ddle) | Code | v | of (D) (Instr and 5 |) :. 3, 4 b) | | able | | | An or Nu of | ımber | | | _ |
| Visser (Last) | nd Address of Precision | Cast, LLC (First) | (Mid | | Code | | of (D) (Instr and 5 |) :. 3, 4 b) | | able | | | An or Nu of | ımber | - | | _ |
| (Street) | nd Address of Precision | Cast, LLC (First) ADWAY | | 216 | Code | | of (D) (Instr and 5 |) :. 3, 4 b) | | able | | | An or Nu of | ımber | | | _ |
| (Last) 5641 NC (Street) DENVE (City) | nd Address of Precision ORTH BROA R | Cast, LLC (First) ADWAY CO | 802 | 216 | Code | | of (D) (Instr and 5 |) :. 3, 4 b) | | able | | | An or Nu of | ımber | | | _ |
| (Last) 5641 NC (Street) DENVE (City) 1. Name at Norder (Last) | nd Address of Precision ORTH BROA R and Address of 1, LLC | Cast, LLC (First) ADWAY CO (State) Reporting Person* | 802 (Zip | 216 | Code | | of (D) (Instr and 5 |) :. 3, 4 b) | | able | | | An or Nu of | ımber | | | _ |

(State)

1. Name and Address of Reporting Person*

Furniture Row, LLC

(Zip)

(City)

| (Last) 5641 NORTH I | (First) BROADWAY | (Middle) | |
|------------------------|---------------------------------|----------|---|
| (Street) DENVER | СО | 80216 | _ |
| (City) | (State) | (Zip) | |
| 1. Name and Addro | ess of Reporting Person* RNEY D | | |
| (Last) | (First) | (Middle) | |
| 5641 NORTH I | BROADWAY | | |
| (Street) | | | _ |
| DENVER | | | |
| DENVER | CO | 80126 | |

Explanation of Responses:

- $1.\ These shares are owned by Norden, LLC, which is owned by Furniture Row, LLC. Furniture Row, LLC is controlled by Barney D.\ Visser.$
- 2. These shares are owned by Visser Precision Cast, LLC, which is owned by Furniture Row, LLC. Furniture Row, LLC is controlled by Barney D. Visser.

<u>Gregory A. Ruegsegger, Power of Attorney</u> <u>03/03/2014</u>

** 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.