(Street) GREENWICH

(City)

CT

(State)

06830

(Zip)

FORM 4

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

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
hours per response:	0.5					

Check this box if no longer subject to

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Section 16. Forr																				
may continue. S	See Instruction	1(b).		F							s Exchange pany Act of									
1. Name and Addr	ess of Repor	ting Person *			2. Iss	uer	Name and	l Ticker	or Trading	g Sym	ibol						Person	(s) to Issuer		
Silver Point Capital L.P. Coppe					pper Property CTL Pass Through Trust [								(Chec	(Check all applicable)						
					NO	NE	]								Officer (c	nive title	Δ			
` ' ` ' ` '					3. Date of Earliest Transaction (Month/Day/Year) 01/19/2023									Officer (give title Other (specify below) below)						
· · · · · · · · · · · · · · · · · · ·				nendment, Date of Original Filed (Month/Day/Year)							6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)													Form filed by One Reporting Person							
GREENWICH CT 06830													X Form filed by More than One Reporting Person							
(City)	(State)	(Zi	ip)																	
		Та	able I - No	n-Dei	rivativ	e S	ecuritie	s Acq	uired,	Disp	osed of	, or	Benefi	cially Ov	vned					
1. Title of Securit	d Address of Reporting Person* Point Capital L.P.  (First) (Middle) EENWICH PLAZA, FIRST FLOOR  VICH CT 06830  (State) (Zip)  Table I -  ecurity (Instr. 3)  ifficates  ifficates  ifficates  tr. 3) Price of Derivative Security  d Address of Reporting Person* Point Capital L.P.  (First) (Middle)  Table I -  ecurity (Instr. 3)  3. Transaction Date Executi if any (Month/Day/Year)  Price of Derivative Security  (Month/Day/Year)  Conversion Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Or Exercise Price of Derivative Security  Conversion Or Exercise Price of Or Exe		Date	Transaction ate lonth/Day/Yea		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securit Disposed				nd 5) Securities Beneficiall Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Transactio			ang (Check Applicable porting Person han One Reporting Person han One Reporting 7 from: Direct (D) or Indirect (I) (Instr. 4)  of 10. Ownership Form: 1 Ownership Form: 1 Ownership Form: 1 Ownership Form: 1 Ownership I Ownership Form: 1 Ownership I Ownership	(Instr. 4)	
Trust Certificate	es			01/	19/202	3			S		110,00	00	D	\$12.6	10,03	2,183		D <sup>(1)</sup>		
Trust Certificate	es			01/	19/202	3			S		100,00	00	D	\$12.6	9,932	2,183		D <sup>(1)</sup>		
			Table II - I								sed of, o				ed					
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution D if any (Month/Day/	ate, Transaction Code (Instr.				6. Date Exerci Expiration Da (Month/Day/Y		ate Sec (ear) Deri		7. Title and Amount Securities Underlyin Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e O s Fo ally D or g (I)	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	<b>.</b>	Amount or Number of Shares		Transacti (Instr. 4)	ion(s)			
Name and Addr	ess of Repor	ting Person *																		
Silver Point	Capital I	<u>P.</u>																		
(Last) TWO GREEN	,	•	(Middle)																	
(Street) GREENWICH	СТ		06830																	
(City) (State) (Zip)																				
1. Name and Addr	ess of Repor	ting Person*																		
O'Shea Robo	ert J																			
(Last) (First) (Middle) TWO GREENWICH PLAZA, FIRST FLOOR																				
						_														

1. Name and Address			
(Last) TWO GREENWIC	(First) CH PLAZA, FIRS	(Middle) T FLOOR	
(Street) GREENWICH	CT	06830	
(City)	(State)	(Zip)	

1. Silver Point Capital, L.P., ("Silver Point") or its wholly owned subsidiaries are the investment managers of Silver Point Capital Fund, L.P., Silver Point Capital Offshore Master Fund, L.P., Silver Point Distressed Opportunities Fund, L.P., Silver Point Distressed Opportunity Institutional Partners, L.P., and Silver Point Distressed Opportunity Institutional Partners Master Fund (Offshore), L.P. (the "Funds") and, by reason of such status, may be deemed to be the beneficial owner of all the reported securities held by the Funds. Silver Point Capital Management and as a result may be deemed to be the beneficial owner of all securities held by the Funds. Messrs. Edward A. Mule and Robert J. O'Shea are each members of Management and as a result may be deemed to be the beneficial owner of all of the securities held by the Funds.

## Remarks:

/s/ Steven Weiser, Authorized Signatory on behalf of Silver Point 01/23/2023 Capital, L.P.

/s/ Steven Weiser (as attorney-in fact on behalf of Robert J. O'Shea, 01/23/2023 individually)

/s/ Steven Weiser (as attorney-infact on behalf of Edward A. Mule, 01/23/2023 individually)

\*\* 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.