RYE

(City)

NY

(State)

10580

(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 Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	. ,			Filed							ities Exchar ompany Act			1934				
		Reporting Person		<u>Γ AL</u>		<u>S</u>	TV	me <b>and</b> T			g Symbol GS GRO	<u>DUF</u>	P IN		(Check all ap Dire	plicable) ctor		Owner
(Last) ONE CO	(Fir	,	Middle	e)	-	te d	of E		insaction	(Mon	th/Day/Year	r)			Offic belo	cer (give title ow)	Othe belov	r (specify w)
(Street)  RYE NY 10580  (City) (State) (Zip)			0	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tabl	e I -	· Non-Deriv	ative \$	Se	cui	rities A	cauire	d. Di	sposed o	of. o	r Bei	nefic	ially Own	ed		
1. Title of S	Security (Inst			2. Transaction Date (Month/Day/	on 2. Fear) if	A. I xec	Deer cution	med on Date, Day/Year)	3. Transac Code (I 8)	ction	4. Securiti Disposed 5)	es Ac	quire	d (A) d	or 5. Ar and Secu Bene Own	nount of rities eficially ed owing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
									Code	v	Amount	(A (D	"	Price	(Inst	saction(s) r. 3 and 4)		
Common	Stock			09/19/20					S		1,100			\$38		340,330	<b>D</b> <sup>(1)</sup>	
		Та	ble	II - Derivat (e.g., p							osed of, convertib					i		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exed if ar	Deemed cution Date, ny nth/Day/Year)	4. Transacti Code (In: 8)				Expiration le (Month/Day		Date	Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership
					Code	,	,	(A) (D)	Date Exerc	isable	Expiration Date	Titl	N of	umbe	1			
		Reporting Person		<u>Γ AL</u>														
(Last) ONE CO	RPORATE	(First) CENTER		(Middle)		-												
(Street)	:	NY		10580		-												
(City)		(State)		(Zip)														
	nd Address of	f Reporting Person	•															
		(First) STORS, INC CENTER		(Middle)														
(Street)																		

1. Name and Address of Reporting Person*  GGCP, INC.									
(Last) (First) (Middle) 140 GREENWICH AVENUE									
(Street) GREENWICH	СТ	06830	_						
(City)	(State)	(Zip)							

## Explanation of Responses:

1. These securities are owned by GAMCO Investors, Inc. ("GBL"). GGCP, Inc. and Mr. Mario J. Gabelli have less than a 100% interest in GBL and hereby disclaim ownership of these securities in excess of their pecuniary interests.

/s/ Douglas R. Jamieson,
Attorney-In-Fact for MARIO J.
GABELLI, GGCP, INC., and
GAMCO INVESTORS, INC.

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.