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

mstruct	ion 1(b).			Filed								ies Exchan mpany Act			934					
		f Reporting Person		AL		S	TV			ker or Tra		Symbol SS GRC	<u>UP</u>	INC		. Relationsh Check all ap Dire			) to Issuer	
(Last) ONE CO	(Fir	,	Middle)	)	1	ite (	of E		Tran	saction (N	Month	n/Day/Year)	)			Offic belo	cer (give title w)		ther (speci elow)	ify
(Street) RYE	NY	7 1	0580		4. If <i>i</i>	Ame	endr	ment, C	ate	of Origina	al File	ed (Month/D	)ay/Ye	ar)		ine) Form	or Joint/Grou n filed by On n filed by Mo	e Reporting	Person	
(City)	(Sta	ate) (Z	Zip)																	
4 770 6			e I -	Non-Deriv					Ac		Dis							I c 0	.:   <b>7</b> NJ	
1. Little of S	Security (Ins	tr. 3)		2. Transacti Date (Month/Day		Exe	ecuti any	emed ion Dat /Day/Yo	Code (Instr. 5)				and Secu	ficially ed	6. Ownersh Form: Dire (D) or Indirect (I) (Instr. 4)	of In Bene Own	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount	(A (D	or	Price	Repo Trans				,
Common	Stock			09/06/2						S		1,700		)	\$37.		48,100	<b>D</b> <sup>(1)</sup>		
		Та	ble I	l - Derivat e.g., pı(								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)	Execu	eemed ution Date, th/Day/Year)	4. Transa Code ( 8)		on tr.	5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. and 5)	tive ties ed	6. Date Expirati (Month/	on D		Deriv	int of rities rlying ative rity (l	f g	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or India (I) (Inst	hip of In Bene D) Own rect (Inst	Nature ndirect eficial ership tr. 4)
					Code	,	v	(A) (	D)	Date Exercisa	able	Expiration Date	Title	or Nu of	nount imber ares					
		f Reporting Person		<u>AL</u>																
(Last) ONE CO	RPORATE	(First) CENTER	(1)	<i>f</i> iddle)																
(Street)		NY	1	0580		-														
(City)		(State)	(Z	ľip)																
	nd Address of	f Reporting Person	*																	
		(First) STORS, INC CENTER	(N	Aiddle)																
(Street)						-														

1. Name and Addres	s of Reporting Pe	rson*	
(Last) 140 GREENWIC	(First) H AVENUE	(Middle)	
(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.