RYE

(City)

NY

(State)

10580

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
OMB Number: 3235-028						
Estimated average burden						
hours per response:						

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 pursuant to Section 16/a) of the Securities Exchange Act of 1934

				rilea								any Act of			34					
		Reporting Person		<u>AL</u>		S	TΜ	me and Ti		-		ymbol GROL	<u>JP</u>	INC		Check all ap Dire	ctor	ng Pei	10% C	Owner
(Last)	(Fir		Middle)		3. Da			arliest Trai	nsaction	(Mont	h/C	Day/Year)				Offic belo	er (give title w)		Other below	(specify)
(Street) RYE (City)	NY (St		0580 Zip)		4. If A	Ame	endn	nent, Date	e of Origii	nal Fil	ed	(Month/Da	ıy/Ye	ar)		ine) Forn	or Joint/Grou n filed by On n filed by Mo son	e Repo	orting Per	son
		Tabl	e I - N	lon-Deriv	ative \$	Se	cur	ities Ac	auired	d. Dis	spe	osed of.	or	Bene	fici	ally Own	ed			
1. Title of	Security (Ins			2. Transac Date (Month/Da	tion	2A Ex if	A. De cecu	eemed tion Date, h/Day/Yea	3. Trans	saction (Instr	,	4. Securiti Disposed and 5)	ies A	quire	d (A)	or 5. Am	ount of rities ficially d	Form (D) o	ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v		Amount		A) or D)	Pric	Repo Trans			,	(,
Common	Stock			06/15/2					G			1,000		D	<u> </u>		84,400		D ⁽¹⁾	
		Та	ble II	- Derivat	ive Se uts, ca	cu	ıriti S. W	es Acquarrants	uired, l , optio	Disp	os	ed of, o	r Be e se	nefi curit	ciall ies)	y Owned				
Security or Exercise (Month/Day/Year) if any		semed 4. Transa Code (i h/Day/Year) 8)				Expira (Month	6. Date Exercisable Expiration Date (Month/Day/Year)		ar) S	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code		, ((A) (D)	Date Exerci	sable		opiration	Title	or Nur of Sha	nber					
		Reporting Person		<u>AL</u>																
(Last) ONE CO	RPORATE	(First) CENTER	(Mi	iddle)																
(Street)		NY	10	580		_														
(City)		(State)	(Zij	p)																
	nd Address of	f Reporting Person	*																	
ONE CO		(First) STORS, INC CENTER	(Mi	iddle)		-														
(Street)						- 1														

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, GCCP, 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.

- * 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.