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 burd	len				
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 and T			g Symbol GS GRO	<u>DUI</u>	<u> </u>		(Check all a	applicable) rector		y Person(s) to	Owner
(Last) ONE CO	(Fin	,	Middle	e)	-	te d	of E		insaction	(Mon	th/Day/Year	r)				ficer (give ti low)	tle	Other below)	(specify)
(Street) RYE (City)	NY (Sta		058 Zip)	0	4. If A	ĸme	endr	ment, Dat	e of Orig	inal Fi	led (Month/I	Day/\	Year)		Line) Fo X	rm filed by	One I	Filing (Check / Reporting Pers than One Rep	son
		Tabl	e I -	· Non-Deriv	ative S	Se	cui	rities A	cauire	d. Di	sposed c	of. o	r Be	nefic	ially Ow	ned			
1. Title of S	Security (Inst			2. Transaction Date (Month/Day/	on 2/ E: Year) if	A. I xec	Deer cution		3. Transac Code (I 8)	ction	4. Securiti Disposed 5)	es A	cquire	ed (A) d	and Sec Be Ow Fo	Amount of curities neficially ned llowing		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	V	Amount	(A (E	A) or D)	Price	Tra (In:	ported insaction(s) str. 3 and 4)			
Common	Stock			06/18/20					S		1,500		D		7814	958,900		D ⁽¹⁾	
		Та	ble	II - Derivat (e.g., p							osed of, convertib					ed			
Security or Ex (Instr. 3) Price Deriv	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date, ny nth/Day/Year)	4. Transaction Code (Instr. 8)		on tr.	5. Number of Of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, and 5)	Expiration I e (Month/Day s		Date	Am Sec Un De Sec	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivativ Security (Instr. 5)	Benefici	re es ally ig d tion(s	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code		,	(A) (D)	Date Exerc	isable	Expiration Date	Tit	o N o	Amoun or Numbe of Shares					
		Reporting Person		<u>Γ AL</u>															
(Last) ONE CO	RPORATE	(First) CENTER		(Middle)															
(Street)	:	NY		10580		-													
(City)		(State)		(Zip)															
	nd Address of	Reporting Person	*																
		(First) STORS, INC CENTER		(Middle)															
(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/ Peter D. Goldstein, Attomey-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.

- * 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.