FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	VAL
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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

											npany Act	-							
l		Reporting Person		NT INC		S					Symbol S GRO	UP IN	<u>C</u>		c all app Direct		ng Per X	10% C	Owner
					3. Da	ite	of Earlies	t Trans	saction (M	lonth/	/Day/Year)		\neg		Offic belo	er (give title w)		Other below)	(specify)
(Last)	(Fire	st) (ľ	Middle)				2004						_						
ONE CO	RPORATE	CENTER			4. If <i>i</i>	Αm	endment,	Date	of Origina	l Filed	d (Month/Da	ay/Year)		6. Indi Line)	vidual o	or Joint/Grou	p Filing	g (Check /	Applicable
(Street)																n filed by One n filed by Mor		-	
RYE	NY	7 1	0580											X	Pers	•	e illal	Olle Ket	Johnny
(City)	(Sta	ate) (Ž	Zip)																
		Tabl	e I - N	lon-Deriv	ative	Se	curitie	s Acc	uired,	Disp	osed of	, or Be	nefi	cially	Own	ed			
1. Title of	Security (Inst	tr. 3)		2. Transact Date (Month/Day		Ex if	A. Deemed recution I any lonth/Day	Date,	3. Transac Code (Ir 8)		4. Securit Disposed and 5)				Secur	icially d		ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Pri	ice	Repoi Trans		(11134	,	(111341. 4)
Common	Stock			10/28/2	004				P		1,500	A	\$1	18.02	8'	74,950		D	
		Та	ble II	- Derivati							sed of, o				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date,	4. Transa Code (8)	ctic	5. Nu of of Deriv Secu Acqu (A) o Disp	vative rities vired r osed)	_	xerci n Da	sable and te	7. Title a Amount Securitie Underlyi Derivativ Security 3 and 4)	nd of s ng	8. P of Der Sec (Ins	Price ivative surity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O' Fo O' (I) 4)	wnership orm: irect (D) · Indirect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
												0	moui						
					Code		V (A)	(D)	Date Exercisa		Expiration Date	0	lumbe f hares						
GABE AL (Last) ONE CO	LLI ASSE	Reporting Person T MANAGE (First) CENTER	MEN	NT INC	ET														
(Street) RYE		NY	10	0580		_													
(City)		(State)	(Zi	ip)															

GABELLI MA	ss of Reporting Per	son
(Last)	(First)	(Middle)
C/O GABELLI A	SSET MANAGI	EMENT INC
ONE CORPORA	TE CENTER	
(Street)		
RYE	NY	10580
(City)	(State)	(Zip)
GABELLI GR INC (Last)	(First)	(Middle)
140 GREENWIC	` '	, ''
(Street)		
GREENWICH	CT	06830

Explanation of Responses:

/s/ James E. McKee, Attorneyin-Fact for MARIO J.
GABELLI and Secretary of
GABELLI ASSET
MANAGEMENT INC. AND
GABELLI GROUP CAPITAL
PARTNERS, INC.

** Signature of Reporting Person Date

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

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.

^{*} 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).