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 Exchan ompany Act			34				
		Reporting Person		<u>Γ AL</u>		<u>S</u>	TV				g Symbol GS GRC	<u>DUP</u>	<u>INC</u>		Check all ap	plicable) ctor		Owner
(Last) ONE CO	(Fir	,	Middle	e)	-	te d	of E		nsaction	(Mon	th/Day/Year)			Offic belo	er (give title w)	Othe belov	r (specify w)
(Street) RYE NY 10580 (City) (State) (Zip)			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
		Tabl	e I -	· Non-Deriv	ative S	Se	cui	rities A	cauire	d. Di	sposed o	of. or	Benet	fici	ally Own	ed		
1. Title of S	Security (Ins			2. Transactio Date (Month/Day/\)	on 2/ Ex Year) if	A. I xec	Deer cution		3. Transa Code (8)	ction	4. Securition Disposed (5)	es Acq	uired (A	A) or	5. An Secu Bene Owne	nount of rities ficially ed wing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
									Code	v	Amount	(A) (D)			(Instr	rted saction(s) r. 3 and 4)		
Common	Stock			07/23/20					S		6,000	D				129,300	D ⁽¹⁾	
		Та	ble	II - Derivat							osed of, convertib							
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. Transaction Code (Instr. 8)		on tr.	5. Number of Of Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5)	Expiration I e (Month/Day s		Date	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	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	Title	Amo or Num of Shar	ber				
		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) 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, 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.

- * 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.