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 i(b).			Filed							ities Exchanompany Act			l				
		Reporting Person		ΓAL		S	TV	me and T			g Symbol GS GRC	UP II	NC		elationshi ck all app Direc	olicable)	ng Person(s) to	Issuer Owner
(Last)	(Fir	,	Middle	e)	-	te d	of E		nsaction	(Mon	th/Day/Year)	1			Office	er (give title w)	Other below	(specify r)
(Street) RYE	NY	· · · · · · · · · · · · · · · · · · ·	058	0	4. If A	Ame	endr	nent, Dat	e of Origi	nal Fi	led (Month/D	ay/Yea	r)	Line)	Form	n filed by One	p Filing (Check e Reporting Per re than One Re	rson
(City)	(St	ate) (Z	Zip)											X	Pers	on		
		Tabl	eI-	Non-Deriv	ative	Se	cui	rities A	cquire	d, Di	sposed o	f, or B	Benefi	ciall	y Owne	ed		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day			rear) E	xec an	у	ned n Date, Day/Year)	3. Transaction Code (Instr. 8)			es Acquired (A) Of (D) (Instr. 3,		4 and Secu		ficially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	e	Repo		(,	(mean ty
Common	Stock			02/24/20	09				S		1,700	D	\$37	7.797	1 1,0	037,200	D ⁽¹⁾	
		Та	ble	II - Derivat							osed of, convertib				Owned			
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. Transac Code (I 8)		on tr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expira (Mont	ation [7. Title Amour Securit Underl Derivat Securit 3 and 4	nt of ties ying tive ty (Instr	of De Se (Ir	Price f erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	,	,	(A) (D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er				
		Reporting Person		ΓAL														
(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. Name and Address of Reporting Person* GGCP, INC.									
(Last) (First) (Middle) 140 GREENWICH AVENUE									
(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.