## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL							
	OMB Number:	3235-0287						
	Estimated average burden							
1	hours per response:	0.5						

Section	16. Form 4 or ons may contin		STAT		d pursua	nt to	Sectio	on 16(a)	of the Se	curitie	es Exchan	ge Act	of 193		RSH	IP	Estir		nber:   average burd   response:	3235-0287 en 0.5
	d Address of DANIEL	Reporting Person*			2. Issu SAC	uer N	Name <b>a</b>	ind Tick	ker or Trad VNICA	ding S	NS INC					all appl	icable)	Ĭ	erson(s) to Is  X 10% C	
(Last) 500 PARI	(Fii K AVENUI	,	Middle)		07/01	1/20	009				Day/Year)					below			below)	
(Street) NEW YC			10022 Zip)		4. If A	men	idment,	, Date o	f Original	Filed	(Month/Da	ay/Yea	ır)		i. Indiv .ine) X	Form	filed by O	ne Re	ling (Check A eporting Pers nan One Rep	on
		Tabl	e I - Nor	-Deriv	ative S	Sec	uritie	s Acc	quired,	Dis	osed o	f, or	Ben	efici	ally (	Owne	d			
Date				Day/Year)		2A. Deemed Execution Da if any (Month/Day/Y		3. Transa Code (		4. Securi Disposed 5)	ities Acquired ( <i>A</i> d Of (D) (Instr. 3,		d (A) o r. 3, 4 a	r and	5. Amou Securiti Benefic Owned Reporte	es ially Following	Fo (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)	Pric	e	Transac (Instr. 3	tion(s)			(1130.4)
Class A Common Stock		07/01	07/01/2009				P		300	A		\$5	5.1	.1 480,000			D			
		Та	uble II - D (e								sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year		4. Transactio Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				vative irity r. 5)	ive derivative y Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V	,	(A)	(D)	Date Exercisal		Expiration Date	Title	or	ount mber ares						
	d Address of DANIEL	Reporting Person*				-														

1. Name and Address of Reporting Person*  TISCH DANIEL R								
(Last)	(First)	(Middle)						
500 PARK AVENUE								
(Street)	NIX	10022						
NEW YORK	IN Y	10022						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* <u>TOWERVIEW LLC</u>								
(Last)	(First)	(Middle)						
500 PARK AVENUE								
(Street)								
NEW YORK	NY	10022						
(City)	(State)	(Zip)						

## Explanation of Responses:

## Remarks:

1. In addition to TowerView LLC, this Form 4 is being jointly filed by Daniel R. Tisch, who is General Member of, and has the same business address as, TowerView LLC and may be deemed to have a pecuniary interest in securities owned by it.

> Daniel R. Tisch 07/01/2009 Daniel R. Tisch 07/01/2009

\*\* Signature of Reporting Person

Date

\*\* 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.