FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	Washington, D.C. 2	20549	
STATEMENT OF	CHANGES IN BE	ENEFICIAL OV	VNERSHIP

ington, D.C. 20549	OMB APPROVAL

OMB Number: 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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	d Address of RVIEW I	Reporting Person*							er or Tra		Symbol NS IN	<u>C</u> [SGA				p of Reportin blicable) ctor		rson(s) to Is	
(Last) 460 PAR	(Fi K AVENUI	· ·	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/11/2017 Officer (give title below) Other (specify below)															
(Street) NEW YC			10022 Zip)		4. If <i>A</i>	Ame	endment,	, Date o	f Origina	l Filed	(Month/Da	ay/Ye	ear)		6. Indi Line) X	Forn	r Joint/Group n filed by One n filed by Mor on	e Rep	oorting Pers	on
		Tabl	e I - No	n-Deriva	ative	Se	curitie	s Acc	quired,	Dis	posed c	of, c	r Bei	nefic	ially	Owne	ed			
1. Title of S	Security (Inst	r. 3)		2. Transa Date (Month/D) E	2A. Deem Execution if any (Month/D	n Date,	3. Transa Code (8)		4. Securi Disposed 5)					Secur Benef Owne	icially d Following	Fori	ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Prid	ce	Repor Transa (Instr.	ted action(s) 3 and 4)			(Instr. 4)
Class A C	Common Sto	ock		04/11/	/2017				S		479		D	\$5	1.35	1,1	196,232		D	
Class A C	Common Sto	ock		04/12	/2017				S		1,959)	D	\$5	1.35	1,1	194,273		D	
		Та	ıble II - I								sed of, onvertib					wned		,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transac Code (In 8)		ı of	rative rities ired r osed)	6. Date E Expiratio (Month/I	on Dat		An Se Un De Se	Title and nount of curities derlying rivative curity (for details)	f G g	Deri Sec (Ins		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Tit	or Ni of	umber						
	d Address of RVIEW I	Reporting Person*																		
(Last)	L AVENIII	(First)	(Mide	dle)																

TOWERVIEW LLC									
(Last)	(First)	(Middle)							
460 PARK AVENUE									
(Street)									
NEW YORK	NY	10022							
(City)	(State)	(Zip)							
1. Name and Address		n [*]							
(Last)	(First)	(Middle)							
460 PARK AVEN	NUE								
(Street)									
NEW YORK	NY	10022							
(City)	(State)	(Zip)							

Explanation of Responses:

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 it.

> Daniel R. Tisch Daniel R. Tisch

04/12/2017 04/12/2017

** 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.