FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	DVAL
	OMB Number:	3235-0287
l	Estimated average burd	en
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Section	on 30(h)	of the	İnv	estmen	nt Con	npany Act	of 19	40							
	nd Address o	f Reporting Person* $L R$					Name a					Symbol NS INC	<u>C</u> [:	SGA]				p of Reportin blicable) ctor	_	erson(s) to Is	
(Last) 500 PAR	(F K AVENU	,	Middle)			ate o		st Trans	sac	ction (M	onth/[Day/Year)					Offic below	er (give title w)		Other (below)	(specify
(Street) NEW YO (City)			10022 Zip)		4. If	Ame	ndment	, Date (of C	Original	Filed	(Month/Da	ay/Ye	ar)		i. Indiv ine) X	Forn	r Joint/Group n filed by Ono n filed by Mor on	e Re	porting Pers	on
		Tab	e I - Noi	n-Deriv	ative	Se	curitie	s Ac	qu	ıired,	Dis	posed c	f, o	Ben	efici	ally	Owne	ed			
1. Title of Security (Instr. 3)		etr. 3)	2. Transa Date (Month/D			ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		۱	3. Transaction Code (Instr. 8)							Securi Benefi	cially I Following	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	е	Transa	action(s) 3 and 4)			(111511.4)
Class A C	Common S	tock		06/18	/2009					P		100		A	\$5	.63	40	67,211		D	
		Ta	able II - I (sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	Date,	4. Transa Code (I 8)		of	ired r osed) : 3, 4	E>	Date Expiration	n Date		Ame Sec Und Der	itle and ount of urities erlying vative urity (In 4)		Deri	rice of vative urity tr. 5)	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)		ate xercisal		Expiration Date	Title	or Nui of	ount mber ares						
	nd Address o	f Reporting Person*		,	,		·				-			•							
(Last)	K AVENU	(First)	(Midd	dle)																	

	of Reporting Person*	
TISCH DANIE	<u>L R</u>	
,		
(Last)	(First)	(Middle)
500 PARK AVENU	JE	
(Street)		
NEW YORK	NY	10022
(City)	(State)	(Zip)
1. Name and Address of	of Reporting Person*	
1. Name and Address of TOWERVIEW		
		(Middle)
TOWERVIEW	(First)	(Middle)
TOWERVIEW (Last)	(First)	(Middle)
TOWERVIEW (Last)	(First)	(Middle)
(Last) 500 PARK AVENU	(First)	(Middle)
(Last) 500 PARK AVENU (Street)	(First) JE	

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 demed to have a pecuniary interest in securities owned by it.

> Daniel R. Tisch 06/18/2009 Daniel R. Tisch 06/18/2009 ** Signature of Reporting Person Date

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

** 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.