FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

**GABELLI MARIO J** 

C/O GAMCO INVESTORS, INC

(First)

(Middle)

(Last)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

By: Investment Partnership<sup>(1)</sup>

11. Nature of Indirect Beneficial Ownership (Instr. 4)

Instruct	tion 1(b).			Fil								curities Excha							
1		Reporting Person*	ET	AL	2.	Issu	er Naı		<b>d</b> Tic	ker o	r Trad	Company Adding Symbol	Ct OT 194	5	i. Relationshi Check all ap	olicable)	orting P		) to Issuer 0% Owner
(Last) (First) (Middle) ONE CORPORATE CENTER				3. Date of Earliest Transaction (Month/Day/Year) 02/29/2016									Officer (give title below)  Director X 10% Owner  Officer (give title below)  Other (specify below)						
(Street) RYE NY 10580			4.	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						
(City)	(St	ate)	(Zip)												Pers	SOII			
		Tab	le I -	Non-Deri	vativ	/e S	ecui	rities	Ac	quir	red, I	Disposed	of, or	Benefici	ally Own	ed			
1. Title of S	Security (Inst	r. 3)		2. Transaction Date (Month/Day/		Exe if an			) C 8)	ransa ode (I )	Instr.	4. Securities Disposed Of	(A) or	tr. 3, 4 and 5)	5. Amount Securities Beneficial Owned For Reported Transaction	ly Ilowing	Form:	ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									C	ode	٧	Amount	(D)	Price	(Instr. 3 ar				
Common	Stock			02/29/20	16					S		900	D	\$14.0658	3 4,10	00		I	By: Investment Partnership
Common	Stock														6,00	00	D	(2)	
		Ta	able	II - Deriva (e.g., p								sposed of							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	3A. Deemed Execution Date, if any Month/Day/Year)		4. Transactior Code (Instr 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Da			Amo Secu Undo Deri		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersi Form: Direct (I or Indire (I) (Instr.	(D) Beneficia (D) Ownersh rect (Instr. 4)
					Code	e V		(A) (	(D)	Date Exe	e rcisab	Expiratio le Date	n Title	Amount or Number of Shares					
		Reporting Person*  STORS, INC.	ET	AL															
(Last) ONE CO	RPORATE	(First) CENTER		(Middle)															
(Street)		NY		10580															
(City)		(State)		(Zip)															
		Reporting Person <sup>*</sup> tal Group, Inc																	
(Last) ONE CO	RPORATE	(First) CENTER		(Middle)															
(Street)		NY		10580															
(City)		(State)		(Zip)															
1. Name an	nd Address of	Reporting Person*					1												

ONE CORPORATE CENTER								
(Street)	NY	10580						
(City)	(State)	(Zip)						
(Last)	(First)	(Middle)						
(Last)	(First)	(Middle)						
140 GREENWICH AVENUE								
(Street)								
GREENWICH	CT	06830						
(City)	(State)	(Zip)						

## **Explanation of Responses:**

1. GAMCO Investors, Inc. and Associated Capital Group, Inc. have less that a 100% interest in this entity; GGCP, Inc. has less than a 100% interest in GAMCO Investors, Inc. and Associated Capital Group, Inc.; and Mario J. Gabelli has less than a 100% interest in GGCP, Inc. The amount of securities reported as beneficially owned reflects the total amount of securities held by this entity which is greater that the Reporting Persons' indirect pecuniary interests. The Reporting Persons hereby disclaim ownership of these securities in excess of their pecuniary interests.

2. These shares are owned by Associated Capital Group, Inc.

/s/ Douglas R. Jamieson,
Attorney-In-Fact for MARIO J.
GABELLI, GGCP, INC., and
GAMCO INVESTORS, INC.
/s/ Kevin Handwerker,
Executive VP, General Counsel
& Secretary of ASSOCIATED
CAPITAL GROUP, 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.