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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See				то	FOF CHANGES IN BENEFICIAL OWNERSHIP											OMB Number: 3235-0287 Estimated average burden hours per response: 0.5				
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		f Reporting Person <sup>*</sup> ital, <u>LLC</u>			FR	EC	r Name <b>an</b> QUENC						<u> </u>		Relationshi heck all app X Direc	blicable	)	·	s) to Is: 0% Ow	
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					4. lf	Am	endment, [	Date of (	Orig	ginal Fi	led (Montl	h/Day/	rear		Individual o	r Joint/	Group Fili	ing (Ch	eck Ap	oplicable
(Street) MOUNT NY 10549 KISCO														filed b	filed by One Reporting Person filed by More than One Reporting n					
(City)	(S		Zip)																	
Title of	Socurity (Inc		_	Non-Deriva			curities	Acqu 3.	ire		Securities				ally Own		6. Owne	rehin	7 Nat	ure of
1. Title of Security (Instr. 3)			-   c	Date (Month/Day/Year)		ecut any	tion Date, n/Day/Year)	Transaction Code (Instr. 8)		ion 🛛 Di	Disposed Of (D)		(Instr. 3, 4 and 5)		Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		Indirect Beneficial Ownership (Instr. 4)	
								Code	v	/ A	mount	(A) or (D)	P	rice	Reported Transactio (Instr. 3 an				(	,
Common Stock				09/16/2020	)			Р			6,000	00 A \$		510.4269	1,467,745		Ι		See footnotes <sup>(1)(3)</sup>	
Common Stock														271,5	504		I See for		notes <sup>(2)(3</sup>	
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. Title of Derivative	2. Conversion	3. Transaction Date		Deemed ecution Date,	4. Trans		5. Nu	mber 6	Da		rcisable a	nd 7	. Titl	le and unt of	, 8. Price of Derivative	9. Nur deriva	nber of	10. Owne	ership	11. Natu of Indire
Security Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year) ii		fany ( Month/Day/Year) 8		(Ins		ative (frities ired osed . 3, 4	ties ed sed		Day/Year)		Securities Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5) Ben Own Foll Rep Trai		ned d			Benefici Ownersi (Instr. 4)
						Γ			Date		Expirat			Amount or Number of						
Name a	d Address o	f Reporting Person*			Code	• <b>  v</b>	(A)	(D) E	xer	rcisable	Date	T	ïtle	Shares						
		ital, LLC																		
(Last)		(First)		(Middle)																
SUITE 2	DIO CIRCI 102	ĿĖ																		
Street) MOUNT	KISCO	NY		10549		_														
(City)		(State)		(Zip)																
		f Reporting Person <sup>*</sup> LONG ONLY	<u> </u>	ALUE FU	<u>ND</u> ,															
(Last) 116 RAI SUITE 2	DIO CIRCI	(First) _E		(Middle)																
Street) MOUNT	KISCO	NY		10549		_														
(City)		(State)		(Zip)																
. Name ar	nd Address o	f Reporting Person*																		

Brolin Jonatha	<u>n</u>							
(Last)	(First)	(Middle)						
116 RADIO CIRCLE								
SUITE 202								
(Street)								
MOUNT KISCO	NY	10549						
,								
(City)	(State)	(Zip)						

## Explanation of Responses:

1. These securities are held by Edenbrook Long Only Value Fund, LP, a private fund managed by Edenbrook Capital, LLC and may be deemed to be beneficially owned by Edenbrook Capital, LLC by virtue of its role as the investment manager of such private fund. In addition, Jonathan Brolin may be deemed to be a beneficial owner of such securities by virtue of his role as managing member of Edenbrook Capital, LLC.

2. These securities are held in the account of a private fund managed by Edenbrook Capital, LLC and may be deemed to be beneficially owned by Edenbrook Capital, LLC by virtue of its role as the investment manager of such private funds. In addition, Jonathan Brolin may be deemed to be a beneficial owner of such securities by virtue of his role as managing member of Edenbrook Capital, LLC. 3. Each Reporting Person disclaims beneficial ownership in the securities reported on this Form 4 except to the extent of its or his pecuniary interest, if any, therein, and this report shall not be deemed to be an admission that such Reporting Person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Edenbrook Capital, LLC; By:	
/s/ Jonathan Brolin, Managing	09/16/2020
<u>Member</u>	
<u>/s/ Jonathan Brolin</u>	09/16/2020
Edenbrook Long Only Value	
Fund, LP, By: /s/ Jonathan	
Brolin, Managing Member of	09/16/2020
Edenbrook Capital Partners,	
LLC	
** 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.