SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

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

1. Name and A MILLS K		2. Date of E Requiring S (Month/Day 07/29/202	itatement /Year)								
(Last) (First) (Middle) 640 FIFTH AVENUE, 12TH FLOOR					4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) NEW YORK	NY	10019	-		A	Officer (give title below)		(specify (Cł		Individual or Joint/Group Filing neck Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) Government (Instr. 2) Government (Instr. 3) Government (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
E			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Sec (Instr. 4)				cise	5. Ownership Form: Direct (D)	Ownership (Instr.
I I I I I I I I I I I I I I I I I I I		Date Exercisable	Expiration Date	Title		Amount Derivati or Security Number of Shares		ve	or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ Karen G. Mills

07/29/2020

Date

** Signature of Reporting Person

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 5 (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.