FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
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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

					OI 3	Secu	011 30(11)) or the	invesim	ent Co	прапу Аст	01 1940	,								
Name and Address of Reporting Person* TOWERVIEW LLC						2. Issuer Name and Ticker or Trading Symbol TEJON RANCH CO [TRC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
TOVIL	ICVIL VV													2	C Dire	ctor	X	10% C	wner		
(Last) 460 PAR	(F K AVENU	,	(Middle)				of Earlie	st Trans	saction (Month	Day/Year)				Offic belo	er (give title w)		Other below)	(specify		
					4 If	If Amendment, Date of Original Filed (Month/Day/Year)								6 In	6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW YO	ORK N	Y :	10022			7 4110	Sildineill	i, Date (o o o original rice (normal copy real)) Fori Y Fori	orm filed by One Reporting Person find filed by More than One Reporting forms					
(City)	(S	tate)	(Zip)																		
		Tab	le I - No	n-Deriv	ative	Se	curitie	es Ac	quire	l, Dis	posed o	f, or	Bene	ficiall	y Own	ed					
Date				2. Transa Date (Month/D		ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			A) or 3, 4 and	Secui Benet Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
						Code			e v	Amount	mount (A) or (D)		Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common Stock 06			06/06	/2019		P		2,426 A \$		\$16.0	5 3,	3,692,426		D							
		Ta									osed of, onvertib				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transa Code (8)		of Derive Secuence (A) of Disperied of (D	osed)) r. 3, 4	6. Date Expirat (Month	ion Da		7. Title Amou Secur Under Deriva Secur and 4	nt of ities lying ative ity (Ins	S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Or Fo Di or (I)	o. wnership orm: irect (D) · Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amor or Num of Share	ber							
	nd Address of RVIEW	f Reporting Person*																			
(Last)		(First)	(Mido	dle)																	

1. Name and Address of Reporting Person* TOWERVIEW LLC								
(Last)	(First)	(Middle)						
460 PARK AVENU								
(Street)								
NEW YORK	NY	10022						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person* <u>TISCH DANIEL R</u>								
(Last)	(First)	(Middle)						
460 PARK AVENUE								
(Street)								
NEW YORK	NY	10022						
(City)	(State)	(Zip)						

Explanation of Responses:

Remarks:

In addition to the shares reported on this Form 4, Daniel R. Tisch owns 50,641 Shares of Common Stock of the Issuer and DT Four Partners LLC owns 925,000 Shares of Common Stock of the Issuer. Daniel R. Tisch is General Member of both TowerView LLC and DT Four Partners LLC and may be deemed to have a pecuniary interest in shares owned by them.

> 06/06/2019 Daniel R Tisch Daniel R. Tisch 06/06/2019

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 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.