FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Address of Reporting Person [*] TISCH DANIEL R						2. Issuer Name and Ticker or Trading Symbol TEJON RANCH CO [TRC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 07/11/2023									Offic below	er (give title w)		Other (below)	specify			
460 PARK AVENUE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW YORK NY 10022					Form filed by One Reporting Person X Form filed by More than One Reporting Person																
(Cib) (Cioto) (75-)						e 1	0b5-	-1(c)	Tran	sac	tion Ind	licat	ion	_							
(City) (State) (Zip)						heck atisfy	this box the affir	x to indi rmative	icate that a defense o	a tran: conditi	saction was r ons of Rule 1	nade p L0b5-1	ursuai (c). Se	nt to a c e Instru	ontract, ins ction 10.	truction or w	itten p	blan that is in	tended to		
		Table	I - No	n-Deriva	tive S	ecu	rities	s Aco	uired,	Dis	posed of	f, or	Ben	eficia	ally Ow	ned	_				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (Disposed Of (D) (Instr. 3 5)			d Secur Benef Owne	5. Amount of Securities Beneficially Owned Following		wnership m: Direct or rect (I) tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) or (D) Pr		Price	Repor Transa	Reported Transaction(s) (Instr. 3 and 4)		,	(
Common Stock 07/11/20									A	A 1,122 A S		\$17.2	1 7	0,342		D					
		Tat	ole II -	Derivati (e.g., pu							osed of, convertib					ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		ber vative urities uired or oosed)) r. 3, 4 5)	6. Date Exerc Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		f g nd 4)	3. Price of Derivative Security Instr. 5)		y Di oi (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nun of	ount nber ires							
	nd Address o	f Reporting Person LR	*			Ī															
(Last) 460 PAR	RK AVENU	(First) E	(M	liddle)																	
(Street) NEW Y	ORK	NY	10	022																	
(City)		(State)	(Zi	ip)																	
	nd Address o	f Reporting Person LLC	*																		
(Last) 460 PAR	RK AVENU	(First) E	(M	liddle)																	
(Street) NEW Y	ORK	NY	10)022																	
(City)		(State)	(Zi	in)																	

Explanation of Responses:

Remarks:

In addition to the shares reported on this Form 4, TowerView LLC owns 3,832,827 shares of Common Stock of the Issuer and DT Four Partners LLC owns 1,087,507 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 intersest in shares owned by them.

Daniel R. Tisch

** Signature of Reporting Person Date

07/12/2023

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.