GRAY TELEVISION INC

Form 4

January 29, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

5. Relationship of Reporting Person(s) to

Issuer

323,589

\$0

Ι

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 January 31, Expires:

2005

OMB APPROVAL

Form 4 or Form 5 obligations **SECURITIES**

Estimated average burden hours per response... 0.5

may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

1(b).

Class A

Common

01/27/2015

(Print or Type Responses)

Howell Robin Robinson

1. Name and Address of Reporting Person *

		GRAY TELEVISION INC [GTN]			(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of	3. Date of Earliest Transaction				(Check an applicable)		
4370 PEAC	HTREE ROA	D NE	(Month/D 01/27/20				X Director Officer (giv below)		6 Owner er (specify	
	(Street)		4. If Amer	ndment, Dat	te Original		6. Individual or .	Joint/Group Fili	ng(Check	
ATLANTA, GA 30319			Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securities Ac	quired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Yo	ear) Execution	emed ion Date, if //Day/Year)	3. Transaction Code (Instr. 8)	on(A) or Dis (D) (Instr. 3, 4	sposed of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock							6,841	I	Spouse's 401(k) plan	
Class A Common Stock							62,703	D		
Class A Common Stock							500	I	Children	

A

77,762 A

(1)

Spouse

α.	- 1
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Class A Common Stock	01/27/2015	A	77,762 (1)	A	\$ 0	401,351	I	Spouse
Common Stock						24,955	D	
Common Stock						574,780	I	Spouse
Common Stock						832,500	I	Trust F/B/O Children
Class A Common Stock						999,000	I	Trust F/B/O Children

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	2.	3. Transaction Date		4.	5.	6. Date Exerc			le and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		tionNumber	Expiration D		Amou		Derivative	1
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	Derivative	e		Secur	ities	(Instr. 5)	1
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						I
	•				(A) or						1
					Disposed						-
					of (D)						(
					(Instr. 3,						'
					` ′						
					4, and 5)						
									Amount		
						_			or		
						Date	Expiration	Title	Number		
						Exercisable	Date	11110	of		
				Codo	V (A) (D)						
				Code	V (A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Howell Robin Robinson 4370 PEACHTREE ROAD NE ATLANTA, GA 30319	X						

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Signatures

/s/ Dottie Boudreau by Power of Attorney 01/29/2015

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Represents grant of restricted stock, which vests in one-third increments on January 31, 2016, January 31, 2017 and January 31, 2018.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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