Edgar Filing: GRAY TELEVISION INC - Form 4

GRAY TELH	EVISION INC										
Form 4											
March 24, 20)16										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287		
Check thi		U /	Expires:	January 31							
if no long		IENT O	F CHAN	GES IN I	20						
subject to Section 1				SECUR	ITIES		Estimated average burden hours per				
Form 4 or			Sheeminds						response 0.		
Form 5	Filed pur	suant to S	Section 16	5(a) of the	e Securiti	es Ex	chang	e Act of 1934,	reepeneen	0.0	
obligation	ns Section 17(-	f 1935 or Section	ı		
may cont	inue.			vestment	•				•		
See Instru 1(b).	iction	00(11)	01 010 111		company		01 17				
1(0).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> NEWTON HOWELL			2. Issuer Name and Ticker or Trading Symbol GRAY TELEVISION INC [GTN]					5. Relationship of Reporting Person(s) to Issuer			
								(Last)	(First) (N	/liddle)	3. Date of Earliest Transaction
					alisaction			X Director 10% Owner			
PO BOX 63	3		(Month/Day/Year) 02/22/2016				Officer (give title Other (specify below) below)				
10 DOM 05	5		03/23/2016								
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)			
								_X_Form filed by C			
FORSYTH,	GA 31029-0633							Form filed by M Person	lore than One Re	eporting	
(City)	(State)	(Zip)	Tabl	L Non D	orivotivo S	oourit	ios A or	uired, Disposed of	or Ronoficial	ly Ownod	
										-	
1.Title of	2. Transaction Date			3. 4. Securities Acquired				6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	any	Execution Date, if		Transaction(A) or Disposed of Code (D)			Securities Beneficially	Form: Direct (D) or	Beneficial	
(Insu: 5)		-	Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Owned	Indirect (I)	Ownership		
		`	, , , , , , , , , , , , , , , , , , ,		× ,		·	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common								48,998	D		
Stock								40,990	D		
Class A											
	02/22/2016			٨	10,387	٨	\$0	21 165	D		
Common	03/23/2016	5/25/2010			$A \qquad \underbrace{(1)}_{(1)} \qquad A \qquad \$$			21,165	D		
Stock											

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 (9-02) required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
NEWTON HOWELL PO BOX 633 FORSYTH, GA 31029-0633	Х							
Signatures								
/s/ Dottie Boudreau by Power of Attorney	of	03/24/2016						
**Signature of Reporting Person		D	ate					
Explanation of Responses:								

iation of nesponses.

- * 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). **
- Represents grant of restricted stock, which vests in full on January 31, 2017. (1)

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.