FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL        |           |  |  |  |  |  |  |  |  |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:         | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average b | urden     |  |  |  |  |  |  |  |  |

0.5

hours per response:

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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person*  ROBINSON J MACK |                     |  |           |   | suer Name <b>and</b> Tick<br>AY TELEVI  |           |          |              |                  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner  |   |   |   |  |  |
|---|---------------------|--|-----------|---|---|-----------|----------|--------------|------------------|--|---|---|---|--|--|
| (Last) 4370 PEACHT  | (First) REE ROAD,NE | (Middle)                                 |           |   | ate of Earliest Trans<br>.6/2009        | saction ( | (Month   | n/Day/Year)  |                  | Officer (give title Other (spo<br>below) below)  |   |   |   |  |  |
| (Street) ATLANTA  | GA                  | 30319                                    |           | 4. If a   | Amendment, Date o                       | of Origin | nal File | ed (Month/Da |                  | 6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting |   |   |   |  |  |
| (City)  | (State)             | (Zip)                                    |           |   |   |           |          |              |                  |  | Person  |   |   |  |  |
|   | 1                   | able I - N                               | on-Deriva | ative   | Securities Ac                           | quire     | d, Di    | sposed of    | f, or Be         | neficia  | ally Owned  |   |   |  |  |
| 1. Title of Security (Instr. 3)                           |                     | 2. Transaction<br>Date<br>(Month/Day/Yea |           | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code (Instr.<br>8) |           |          |              |                  | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |   |  |  |
|   |                     |  |           |   |   | Code V    |          | Amount       | (A) or (D) Price |  | Transaction(s)<br>(Instr. 3 and 4)                                |   | (Instr. 4)                                  |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 848,350   | D   |   |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 355,200   | I   | Spouse                                      |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 994,676   | D   |   |  |  |
| Common Class  | A Stock (GTN.A)     | )  | 11/16/20  | 009   |   | P         |          | 4,000        | A                | \$1.4  | 846,083   | I   | Spouse                                      |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 109,750   | I   | Spouse as<br>Trustee for<br>Children        |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 1,189,180   | I   | Spouse as<br>Trustee for<br>Children        |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 35,000  | I   | Delta Fire<br>& Casualty<br>Ins. Co.        |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 33,750  | I   | Delta Fire<br>& Casualty<br>Ins. Co.        |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 10,000  | I   | Delta Life<br>Ins. Co.                      |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 135,795   | I   | Delta Life<br>Ins. Co.                      |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 221,706   | I   | Bankers<br>Fidelity<br>Life Ins.<br>Co.     |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 6,000   | I   | Georgia<br>Casualty &<br>Surety Co.         |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 132,354   | I   | Georgia<br>Casualty &<br>Surety Co.         |  |  |
| Common Stock  | (GTN)               |  |           |   |   |           |          |              |                  |  | 50,000  | I   | Association<br>Casualty<br>Insurance<br>Co. |  |  |
| Common Class  | A Stock (GTN.A)     | )  |           |   |   |           |          |              |                  |  | 32,000  | I   | Association<br>Casualty<br>Insurance<br>Co. |  |  |

| 1. Title of Security (Instr. 3)                     |   | 2. Transa<br>Date<br>(Month/D              | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Yea |         | Date, | 3.<br>Transa<br>Code (<br>8) |          | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |   |     |                     | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported                        |                          | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature of Indirect Beneficial Ownership   |  |  |                                      |  |
|---|---|--|---|---------|-------|------------------------------|----------|---|---|-----|---------------------|--|--------------------------|---|---|--|--|--|--------------------------------------|--|
|   |   |  |   |         |       |                              |          |   | Code  | v   | Amount              | (A)<br>(D)   | or Pri                   | ice   | Transactio<br>(Instr. 3 an  |  |  |  | (Instr. 4)                           |  |
| Common  | Common Stock (GTN)  |  |   |         |       |                              |          |   |   |     |                     |  |                          | 50,000  |   | I  |  | American<br>Southern<br>Insurance<br>Co. |                                      |  |
| Common  | mmon Stock (GTN)  |  |   |         |       |                              |          |   |   |     |                     |  | 5,518(1)                 |   | D   |  |  |  |                                      |  |
| Common  | Stock (GT)  | N)   |   |         |       |                              |          |   |   |     |                     |  |                          |   | 100,000   |  | I G  |  | Gulf<br>Capital<br>Services,<br>Ltd. |  |
| Common  | Class A Sto   | ock (GTN.A)                                |   |         |       |                              |          |   |   |     |                     |  |                          |   | 130,300   |  | I C  |  | Gulf<br>Capital<br>Services,<br>Ltd. |  |
|   |   | Т  | able II   |         |       |                              |          |   |   |     | osed of<br>converti |  |                          |   | Owned   |  |  |  |                                      |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deer<br>Executio<br>if any<br>(Month/E                | emed 4. |       |                              | ction of |   | 6. Date Exercis:<br>Expiration Date<br>(Month/Day/Yea |     | е                   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                          | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)               | 9. Numl<br>derivati<br>Securiti<br>Benefic<br>Owned<br>Followi<br>Reporte<br>Transac<br>(Instr. 4 | ive<br>ies<br>sially<br>ng<br>ed<br>ction(s) | 10.<br>Ownersi<br>Form:<br>Direct (I<br>or Indire<br>(I) (Instr. | Beneficia<br>Ownersh<br>ct (Instr. 4)    |                                      |  |
|   |   |  |   |         | Code  | v                            | (A)      |   | Date<br>Exercisa                                      |     | Expiration<br>Date  | Title  | Amoun<br>Numbe<br>Shares | rof   |   |  |  |  |                                      |  |
| Options -<br>Common<br>Stock<br>(GTN)               | \$9.71 <sup>(2)</sup>   |  |   |         |       |                              |          |   | 06/07/20  | 005 | 06/07/2010          | GTN  | 142,8                    | 75 <sup>(2)</sup>   |   | 142,   | ,875   | D  |                                      |  |
| Options -<br>Common<br>Stock<br>(GTN)               | \$7.64  |  |   |         |       |                              |          |   | 02/01/20  | )10 | 02/01/2013          | GTN  | 300,0                    | 000   |   | 300,   | ,000   | D  |                                      |  |

## **Explanation of Responses:**

- 1. Held in 401K plan and based on plan statement as of 12/31/07.
- $2.\ Reflects\ anti-dilution\ adjustment\ undertaken\ as\ a\ result\ of\ the\ spin-off\ completed\ on\ December\ 30,\ 2005.$

## Remarks:

Dottie Boudreau by power of <u>attorney</u>

11/17/2009

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.