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 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ction 30(I	n) of the I	Investme	nt Cor	npany Act c	if 1940								
1. Name and Address of Reporting Person* PRATHER ROBERT S JR					2. Issuer Name and Ticker or Trading Symbol GRAY TELEVISION INC [GTN]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 4370 PEACHTREE ROAD,NE			(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/18/2004									Officer (g below) Pr	Other (s below)	pecify			
(Street) ATLANTA GA 30319				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(\$	State)	(Zip)																
Table I - No 1. Title of Security (Instr. 3)		2. Da	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securiti	of, or Beneficial urities Acquired (A) or ed Of (D) (Instr. 3, 4 and		5. Amount		ly	Form:	Direct Indirect Itstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code V		Amount (A) or (D)		Price	т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class A (Common St	ock (GTN.A)												225,3	320		D		
Class A Common Stock (GTN.A)												225				By Spouse ⁽¹⁾			
Common Stock (GTN)													20	0			By Spouse ⁽¹⁾		
Common Stock (GTN)			1	11/18/2	3/2004		M		50,000	50,000 A		.75	156,000		D				
Common Stock (GTN)			1	11/18/2	3/2004		S		50,000 D \$		\$13.	333	106,000			D			
			Table II - De (e.							osed of, convertib			/ Own	ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Trans Code	5. Number of Operivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		sable and	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security	rivative curity	9. Numbe derivative Securities Beneficial Owned Following Reported	re Ces Fally C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amoun or Numbe of Shar	r		Transaction(s) (Instr. 4)				
Option - Common Stock (GTN)	\$10.95							09/30/20	004	09/30/2007	Common Stock	110,00	00		110,00	00	D		
Option - Common Stock (GTN)	\$14							11/19/20	000	11/19/2003	Common Stock	41,00	00		41,00	00	D		
Option - Class A Common Stock (GTN.A)	\$17.81							11/19/2000		11/19/2008	Class A Common Stock	9,33'	7	9,33		9,337 D			
Option - Common Stock (GTN)	\$10.13							05/25/20	002	05/25/2005	Common Stock	100,0	00		100,00	00	D		
Option - Common Stock (GTN)	\$12.75	11/18/2004		М			50,000	11/18/20	001	11/18/2004	Common Stock	50,00	00	\$0.00	0		D		
Option - Common Stock (GTN)	\$11.23							01/07/20	004	01/07/2007	Common Stock	67,00	00		67,00	00	D		
Options - Common Stock (GTN)	\$14.06	11/19/2004		A		50,000		05/19/20	005	11/19/2007	Common Stock	50,00	00	\$0.00	50,00	00	D		

Explanation of Responses:

Remarks:

^{1.} Owned by reporting person's wife, as to which shares Mr. Prather disclaims beneficial ownership.

** Signature of Reporting Person

Date

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.