Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours nor roomanas	0.5								

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*			2. Issuer Name <b>and</b> Ticker or Trading Symbol  GRAY TELEVISION INC [ GTN ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)								
HOWELL HILTON H JR						GIATT TELEVISION INC [ GIN ]									Direc			Owner		
(Last) 4370 PE	(Fir	rst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/29/2024									X	Officer (give title below)  Chairman, Pre		below	·		
,					4. If A	If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																Form filed by One Reporting Person				
AILAN	FLANTA GA 30319														Form filed by More than One Reportin Person			porting		
(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication																
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	Securi	ities A	cqu	ired,	Dis	posed of,	or E	3en	eficially	y Own	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea		Execution Date,		e,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			5. Amount of Securities Beneficially Owned Following	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Class A Common Stock				02/29/2024					A		35,651(1)	1	A	\$6.61	3,0	84,674	D			
Class A C	Common St	ock		02/29/2024					F		112,288	]	D	\$6.61	2,9	72,386	D			
Class A Common Stock														8	1,635	I	Spouse			
Class A Common Stock															500	I	Children			
Class A Common Stock														999,000		Ι	Trust F/B/O Children			
Common Stock													832,500		Ι	Trust F/B/O Children				
Common Stock														61	7,609	D				
Common Stock														8	1,226	I	Spouse			
Common Stock														14,232		Ι	By 401(k) plan			
		Та									osed of, o				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execut Ionth/Day/Year) if any	emed ion Date, /Day/Year)	4. Transa Code (I 8)	ction Instr.	n of		6. Date Exerc Expiration Da (Month/Day/N		te	7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		De Se (In	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
	of Perpenses:				Code	v	(A) (E		Date Exercisable		Expiration Date	Title	or	ount mber ires						

1. Represents issuance and vesting of shares above target award related to restricted stock for which the three-year performance period has ended and performance has been certified. The Reporting Person previously reported shares that constitute a target award.

## Remarks:

/s/ Ginger Davis by Power of <u>Attorney</u>

03/01/2024

\*\* 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.