FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB APPROVAL									
	OMB Number:	3235-0287								
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	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 S	Secti	on 30(h	of the	Investme	ent Co	mpany Act	of 194	40								
1. Name and Address of Reporting Person*  BOGER RICHARD LEE						2. Issuer Name <b>and</b> Ticker or Trading Symbol GRAY TELEVISION INC [ GTN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DOGER RICHARD LEE															X	Direc	ctor		10% C	)wner	
(Last) (First) (Middle) PO BOX 723607						3. Date of Earliest Transaction (Month/Day/Year) 11/05/2015										Offic	ficer (give title low)		Other below)	(specify	
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) ATLANTA GA 31139-060'			07		,										Line)  X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(St	ate) (	Zip)													Pers		ne uic	лі Опе Кер	orting	
		Tabl	e I - Nor	า-Deri\	/ative	Se	curiti	es Ac	quired	, Dis	sposed o	f, oı	Ben	efici	ally C	Owne	ed				
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date						Execution			Code	Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4			s, 4 and Seco Ben Owr		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	Brico -		Reported Transaction(s) (Instr. 3 and 4)			(IIISU. 4)	
Common Stock 11/05/						/2015					12,60	0	D	(1	28,066 <sup>(2)</sup>			D			
Class A Common Stock														14,332(3)			D				
		Та									osed of, convertib				y Ow	ned					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)				Date,	4. Transaction Code (Instr. 8)		ı of		Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)			itle and ount of urities erlying ivative urity (In 4)	str. 3	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount nber res							

## **Explanation of Responses:**

- 1. These shares were sold in multiple open market transactions on November 5, 2015 for a weighted average of \$16.60 per share. The sale price ranged from \$16.59 to \$16.62. The reporting person undertakes to provide to Gray Television, Inc., any security holder of Gray Television, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each price utilized to arrive at this weighted average.
- 2. Includes shares previously reported as indirectly owned and total number of shares of common stock has been reduced by 5,804 shares to correct over-reporting on prior fillings.
- 3. Includes 36 shares previously reported as indirectly owned.

## Remarks:

/s/ Dottie Boudreau by Power of Attorney

11/13/2015

\*\* 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.