FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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

| Name and Address of Reporting Person* ROBINSON J MACK | | | uer Name and Tick | | | | | | Relationship of Repor Check all applicable) X Director | 100 | % Owner |
|---|-----------------------------------|---------------------------------|---|-----------------------------------|------------|--------------|------------------------------------|--------|---|---|---|
| (Last) (First) (Middle 4370 PEACHTREE ROAD,NE | | ite of Earliest Trans 1/2008 | action (I | Month | /Day/Year) | | X Officer (give titl below) Chair | | Other (specify below) | | |
| (Street) ATLANTA GA 30319 | | 4. If A | Amendment, Date o | f Origina | al File | d (Month/Day | Year) | | | oup Filing (Check One Reporting P More than One F | erson |
| (City) (State) (Zip) | | | | | | | | | | | |
| | | | Securities Acc | quired | d, Di | | | | 1 | I | |
| 1. Title of Security (Instr. 3) | 2. Transact Date (Month/Day | | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. 8) | | 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | ٧ | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | |
| Common Stock (GTN) | 04/01/2 | 800 | | P | | 12,500 | A | \$0.00 | 136,450 | D | |
| Common Stock (GTN) | | | | | | | Ш | | 95,500 | I | Spouse |
| Common Class A Stock (GTN.A) | | | | | | | Ш | | 747,640 | I | Spouse |
| Common Stock (GTN) | | | | | | | | | 72,250 | I | Spouse as Trustee for Children |
| Common Class A Stock (GTN.A) | | | | | | | | | 1,189,180 | I | Spouse as Trustee for Children |
| Common Stock (GTN) | | | | | | | | | 35,000 | I | Delta Fire & Casualty Ins. Co. |
| Common Class A Stock (GTN.A) | | | | | | | | | 33,750 | I | Delta Fire & Casualty Ins. Co. |
| Common Stock (GTN) | | | | | | | | | 10,000 | I | Delta Life Ins. Co. |
| Common Class A Stock (GTN.A) | | | | | | | | | 135,795 | I | Delta Life Ins. Co. |
| Common Class A Stock (GTN.A) | | | | | | | | | 221,706 | I | Bankers Fidelity Life Ins. Co. |
| Common Stock (GTN) | | | | | | | | | 6,000 | I | Georgia Casualty & Surety Co. |
| Common Class A Stock (GTN.A) | | | | | | | | | 132,354 | I | Georgia Casualty & Surety Co. |
| Common Stock (GTN) | | | | | | | | | 50,000 | I | Association Casualty Insurance Co. |
| Common Class A Stock (GTN.A) | | | | | | | | | 32,000 | I | Association Casualty Insurance Co. |
| Common Stock (GTN) | | | | | | | | | 50,000 | I | American Southern Insurance Co. |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|---------------------------------|--|---|---|---|--------|---------------|-------|---|---|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) Instr. 3 and 4) | | (Instr. 4) | |
| Common Stock (GTN) | | | | | | | | 5,518(1) | D | | |
| Common Class A Stock (GTN.A) | | | | | | | | 124,200 | I | Gulf Capital Services, Ltd. | |
| Common Stock (GTN) | | | | | | | | 2,400 | I ⁽²⁾ | Spouse | |
| Common Class A Stock (GTN.A) | | | | | | | | 1,055,976 | D | | |

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

| | (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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | ı of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Option - Class A Common Stock (GTN.A) | \$15.39 ⁽³⁾ | | | | | | | 11/19/2000 | 11/19/2008 | GTN.A ⁽³⁾ | 11,570 ⁽³⁾ | | 11,570 ⁽³⁾ | D | |
| Option - Common Stock (GTN) | \$10.93 ⁽³⁾ | | | | | | | 11/20/2005 | 11/20/2008 | GTN ⁽³⁾ | 45,720 ⁽³⁾ | | 45,720 ⁽³⁾ | D | |
| Options- Common Stock (GTN) | \$9.71 ⁽³⁾ | | | | | | | 06/07/2005 | 06/07/2010 | GTN ⁽³⁾ | 142,875 ⁽³⁾ | | 142,875 ⁽³⁾ | D | |
| Options- Common Stock (GTN) | \$7.64 | | | | | | | 02/01/2010 | 02/01/2013 | GTN | 300,000 | | 300,000 | D | |

Explanation of Responses:

- 1. Held in 401K plan and based on plan statement as of 12/31/07.
- 2. Shares are held in an IRA account.
- 3. Reflects anti-dilution adjustment undertaken as a result of the spin-off completed on December 30, 2005.

Remarks:

<u>Dottie Boudreau by power of attorney</u> <u>04/08/2008</u>

** 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.