FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

0	MB 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)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					Т		• •							1					
1. Name and Address of Reporting Person* <u>Howell Robin Robinson</u>					2. Issuer Name and Ticker or Trading Symbol GRAY TELEVISION INC [GTN]											olicable)	f Reporting Person(s) to Issuer able) 10% Owner		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/21/2023										Officer (give title below)		Other (speci below)	
4370 PEACHTREE ROAD, NE				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	ΓA GA	A 30319												X	Form filed by One Repo Form filed by More than Person			, I	
(City)	(St	ate) (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	ecui	ities	Acq	uired,	Dis	posed of	, or I	3ene	ficiall	y Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)					2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				5. Amo Securi Benefi Owned Follow	cially I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or P	rice	Reported Transaction(s) (Instr. 3 and 4)				
Class A Common Stock 06/21/				06/21/20	023				P		2,000	A	\$	8.66(1)	2,3	12,695	I		Spouse
Class A Common Stock													999,000		I		Гrust F/B/O Children		
Class A Common Stock														8	1,635	D			
Class A Common Stock															500	I	(Children	
Common	Stock												_		8	1,226	D		
Common Stock															11,209		I	2	By Spouse's 401(k) olan
Common Stock															61	7,609	I		Spouse
Common Stock														832,500		I	I I		
		Tal	ole II -	Derivativ (e.g., pu											Owne	d	,		
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, if any			eemed ition Date,	4. Transa	Transaction Code (Instr.		ber vative urities uired r osed) r. 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo		isable and te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. F Der Sec (Ins	Price of ivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D) irect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod		v			Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from a minimum price of \$8.24 to a maximum of \$8.70 per share on June 21, 2023. The reporting person undertakes to provide to Gray Television, Inc., any security holder of Gray Television, Inc., or the staff of the Securities Exchange Commission, upon request, all information regarding the number of shares sold at each separate price within the range set forth above.

Remarks:

/s/ Ginger Davis by Power of ** Signature of Reporting Person

06/22/2023

Attorney

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.