**NEWTON HOWELL** Form 4

Check this box

if no longer

Section 16.

subject to

May 11, 2018

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB 3235-0287

**OMB APPROVAL** 

Number: Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

Class A Common

Stock

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * 2.  NEWTON HOWELL Sym			suer Name <b>and</b> ool	l Ticker or	Trading	<ol><li>Relationship Issuer</li></ol>	5. Relationship of Reporting Person(s) to Issuer			
GI			Y TELEVI		C [GTN	] (C	(Check all applicable)			
(Last)	(First) (	Middle) 3. D	te of Earliest T	ransaction						
		(Mo	th/Day/Year)			_X_ Director		% Owner		
PO BOX 633 05			0/2018			Officer (g	tive title Oth below)	ner (specify		
(Street) 4. If Ame			Amendment, Da	endment, Date Original			6. Individual or Joint/Group Filing(Check			
Filed(Mor				r)		_X_ Form filed	Applicable Line) _X_ Form filed by One Reporting Person			
FORSYTH, GA 31029-0633						Person	Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-I	Derivative	Securities	Acquired, Dispose	d of, or Beneficia	ally Owned		
1.Title of	2. Transaction Da	te 2A. Deemed	3.	4. Secui	rities	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year	) Execution Date	e, if Transact	ionAcquire	d (A) or	Securities	Form: Direct	Indirect		
(Instr. 3)		any	Code	Disposed of (D)		Beneficially	(D) or	Beneficial		
		(Month/Day/Y	ear) (Instr. 8)	(Instr. 3, 4 and 5)		Owned	Indirect (I)	Ownership		
						Following	(Instr. 4)	(Instr. 4)		
					(A)	Reported				
					or	Transaction(s) (Instr. 3 and 4)				
			Code V	7 Amoun	t (D) P	rice (Illstr. 5 and 4)				
Common Stock	05/10/2018		A	9,205 (1)	A \$	0 58,203	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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22,195

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

1. Title of	2.	3. Transaction Date		4. T	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
					.,						
									Amount		
						Date	Evaluation		or		
							Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
•	Director	10% Owner	Officer	Other		
NEWTON HOWELL						
PO BOX 633	X					
FORSYTH GA 31029-0633						

## **Signatures**

/s/ Dottie Boudreau by Power of Attorney 05/11/2018

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) Represents grant of restricted stock, which vests in full on May 31, 2019.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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