FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 OF SECURITIES

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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person * Gift Alicia M				2. Issuer Name and Ticker or Trading Symbol 180 DEGREE CAPITAL CORP. /NY/ [TURN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Treasurer, Secretary					
(Last) (First) (Middle) 7 NORTH WILLOW STREET, SUITE 4B				3. Date of Earliest Transaction (Month/Day/Year) 06/27/2022								110	easurer, Secr	etary		
MONTC	LAIR, NJ	(Street) 07042		4. If An	nendmei	nt, Da	te Orig	ginal Fi	iled(Mont	th/Day/Year)		_X_ Form fil	ed by One Repo	Group Filing orting Person one Reporting		ole Line)
(City	r)	(State)	(Zip)			Table	I - No	on-Der	ivative	Securities	s Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year		, if C	f Code (Instr. 8)		4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D)	Beneficia	nt of Securities ally Owned Following I Transaction(s) and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	V	Amou	(A) or (D)	Price				(I) (Instr. 4)	(msu. 4)
Common	Stock		06/27/2022				P		756	A	\$ 6.09	34,500			D	
								the f	ained i form di isposed	in this fo splays a of, or Bei	rm ar curre	e not requently valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
1 7714 6	I ₂	2 75 4			s, calls,	_	ınts, o			rtible secu			0 D : C	0.31 1	C 10	11 37 (
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	*****	Execution Da Year) any	Co	e, if Transaction Code ear) (Instr. 8)		Number ar		. Date Exercisable nd Expiration Date Month/Day/Year)		Am Uno Sec	Fitle and count of derlying curities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (1 or Indire	Ownership: (Instr. 4)
				С	Code V	V (A) (D)		e rcisable	Expiration Date	on Titl	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Gift Alicia M 7 NORTH WILLOW STREET SUITE 4B MONTCLAIR, NJ 07042			Treasurer, Secretary					

Signatures

Alicia M Gift	06/28/2022
**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).

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.