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)				
(Last) (First) (Middle) 7 NORTH WILLOW STREET, SUITE 4B				3. Date of Earliest Transaction (Month/Day/Year) 08/12/2022									1 re	easurer, Secre	etary	
MONTO	LAIR, NJ	(Street) 07042		4. If Ar	mendme	ent, Da	ate Orig	ginal F	iled(Mont	th/Day/Year)		_X_ Form fil	ed by One Repo	Group Filingorting Person One Reporting		le Line)
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						uired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, if ((Instr. 8)		4. Securities Acquir (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	ally Owned Following Transaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	V	Amou	(A) or (D)	Price				(I) (Instr. 4)	(msu. 4)	
Commor	Stock		08/12/2022				P		10	A	\$ 6.3	34,510			D	
			Table II - I					the red, D	tained i form di isposed	in this for splays a of, or Ben	m are curre eficial	e not requ ntly valid	OMB con	spond unle	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Date	4. Tri Cc Year) (li	ransactic ode nstr. 8)	5. Nu of De Se Ac (A Di of (In 4,	ımber	6. Dand (Mo	ate Exer Expirati onth/Day	on Date /Year) Expiration	7. T Amo Und Secu (Inst 4)	Amount or Number of Shares	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Beneficial Ownership (Instr. 4)

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	08/16/2022
**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.