FORM 4

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

OMB APPR	OVAL
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	es)																
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 10% Owner					
,					3. Date of Earliest Transaction (Month/Day/Year) 06/05/2018									X Officer (give title below) Other (specify below) Treasurer, Secretary				
MONTEC		(Street)			4. If	Amendn	nent,	Date	Origi	nal F	iled(Mon	th/Day/Yea	nr)	_X_ Form fil	ed by One Repo	Group Filing orting Person One Reporting I		ble Line)
MONTC:	LAIR, NJ ((State)	(5	Zip)											a of more unun	one responding r		
(City)	(State)	(2				Tal	ble I ·	- Non-	-Deri	vative S	Securitie	s Acq	uired, Disp	osed of, or	Beneficially	Owned	
1.Title of S (Instr. 3)	Security		2. Transa Date (Month/I	Day/Year)	Exec any	Deemed ution Dar ath/Day/Y		Cod (Ins	le tr. 8)		(A) or l (Instr. 3	(A) or	1 of (E 5)	Beneficia Reported (Instr. 3 a	Transaction	Following a(s)	(I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common	Stock		06/05/2	018					ode P	V	Amoun 1,000	t (D)	\$ 2.21	4 049			(Instr. 4) D	
Common	Stock		06/05/2	018					P		110	A	\$ 2.18	4,159			D	
			Т						equire	cont the f	ained i orm di	n this for splays	orm a a cur	rently valid	uired to re	espond unl	ess	EC 1474 (9- 02)
Security	Conversion	3. Transactio Date (Month/Day/	Year) Exc	. Deemed ecution Dat	Deemed		4. Transaction Code		5. Number of		and Expiration Date (Month/Day/Year) S		Title and mount of nderlying ecurities nstr. 3 and		9. Number o Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownersh Form of Derivativ Security Direct (I or Indire	Beneficial Ownership (Instr. 4)	
						Code	V	(A)	(D)	Date Exe	e rcisable	Expirati Date	ion Ti	Amount or Number of Shares				
Repor	ting O	wners												·				
					Relationships						1							
Reporting	Owner Nai	ne / Address	Director	10% Owr	1				Oth	ier								
Gift Alici 7 NORTI		V STREET				Т		C	-4									

Signatures

MONTCLAIR, NJ 07042

SUITE 4B

Alicia M Gift	06/05/2018
**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).

Treasurer, Secretary

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 nu	mber.