FORM 4

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

OMB APPROVAL
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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				180	2. Issuer Name and Ticker or Trading Symbol 180 DEGREE CAPITAL CORP. /NY/ [TURN]							Direc	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner 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) 05/13/2019								110	easurer, Sect	etary		
MONTCLAIR, NJ 07042				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City)	(State)		(Zip)		,	Гable	I - N	on-De	erivative	Securit	ies Ac	quired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Execu any	Deemed ation Date, i	on Date, if Code (Instr		(A) or Disposed of (D) (Instr. 3, 4 and 5)		Benefici Reported	Reported Transaction(s)		Ownership or Form:	Beneficial		
					(Month/Day/Year)			ode	V	Amount	(A) or (D)	Pric	Ì	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		05/13	3/2019				P		3,000	A	\$ 1.94	36,049			D	
Telimider.	report on a	oparate inte			Deriv	rative Secur	ities A	cqui	Per cor the red, I	sons whatained in form disposed	ho respondin this splays	form a a cur Benefic	to the colle are not req rently valid	uired to res I OMB con	spond unle	ss	1474 (9-02)
1. Title of	2	3. Transacti	on	3A. Deemed	` ' '	puts, calls, v	varra 5.	nts, o					es) . Title and	P Dries of	9. Number	of 10.	11. Natur
	Conversion or Exercise Price of Derivative Security	Date (Month/Day	Execut any	Execution Da	Execution Date, if	Transaction Code	Num of Deri Secu Acq (A) Disp of (I (Ins	Number ar		d Expiration Date Month/Day/Year) An Un Se		Imount of Underlying ecurities Instr. 3 and	ount of lerlying urities tr. 3 and Derivative Security (Instr. 5)		Owners Form of Derivat Security Direct (or Indir (I) (Instr. 4	hip of Indirect Beneficial Ownersh (Instr. 4)	
						Code V	(A)	(D		te ercisable	Expirat Date	tion T	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	05/13/2019
***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.