## Edgar Filing: Gift Alicia M - Form 4

Gift Alicia M

Form 4									
June 06, 2018									
FORM A							OMB APPROVAL		
Washington, D.C. 20549							OMB Number:	3235-0287	
Section 16. Form 4 or Form 5 File	Ionger       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF         on 16.       SECURITIES         4 or       4						Expires: Estimated a burden hour response	rs per	
obligations may continue. Sectio See Instruction 1(b).	n $17(a)$ of the $1$	Public Utility Hol of the Investmen	lding Cor	npan	y Act of	1935 or Section	I		
(Print or Type Responses)									
1. Name and Address of Rep Gift Alicia M	2. Issuer Name an Symbol 180 DEGREE C /NY/ [TURN]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D 7 NORTH WILLOW 06/06/20 STREET, SUITE 4B			-			Director 10% Owner X Officer (give title Other (specify below) Treasurer, Secretary			
Filed(Month/Day/Year) Ap _X MONITCLAIR NL07042					Applicable Line) _X_ Form filed by O	Form filed by One Reporting Person Form filed by More than One Reporting			
(City) (State)	(Zip)			~					
	n Date 2A. Deen Year) Execution any	ned 3. n Date, if Transacti Code Day/Year) (Instr. 8)	4. Securit on(A) or Di (Instr. 3,	ties Ad sposed	cquired d of (D)	uired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct	7. Nature of Indirect	
Common Stock 06/06/2018	3	P	2,167	A	\$ 2.19	6,326	D		
Common 06/06/2018 Stock	3	Р	723	A	\$ 2.1834	7,049	D		

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addr	·ess	Relationships							
	Director	10% Owner	Officer	Other					
Gift Alicia M 7 NORTH WILLOW STRE SUITE 4B MONTCLAIR, NJ 07042	ET		Treasurer, Secretary						
Signatures									
Alicia M Gift	06/06/2018								
<u>**</u> Signature of	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.

Reporting Person