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ATLANTIC TELE NETWORK INC /DE

Form 4

Common

Stock

March 30, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION						OMB APPROVAL				
	OMB Number:	3235-0287								
Check the if no long subject to	ger STATEMENT	Expires: Estimated	January 31, 2005							
Section 1 Form 4 c	16. or	SECURI		burden hours per response 0.5						
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type Responses)										
1. Name and A	Address of Reporting Person CHAEL T	Symbol	_	5. Relationship of Reporting Person(s) to Issuer						
		/DE [ATNI]	E NETWORK INC	(Check all applicable)						
(Last)	(First) (Middle)	3. Date of Earliest Tra (Month/Day/Year)	nnsaction	_X_ Director _X_ Officer (give	titleOth	% Owner her (specify				
C/O ATLANTIC 03/27/2015 below) below) TELE-NETWORK, INC., 600 CUMMINGS CENTER										
	(Street)	4. If Amendment, Dat Filed(Month/Day/Year)	_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
BEVERLY, MA 01915 Form filed by More than One Reporting Person										
(City)	(State) (Zip)	Table I - Non-Do	erivative Securities Acq	uired, Disposed of	, or Beneficia	lly Owned				
1.Title of Security (Instr. 3)	any	tion Date, if Transaction Code th/Day/Year) (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Stock	03/27/2015	H	Amount (D) Price 2,031 S 70.37		D					
Common Stock				9,886	I	Trustee of Samantha R. Prior 2014 Trust				

Trustee of Aidan W.

Prior 2015 Trust

10,286

I

Common Stock 10,986 I By Child

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.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. T	Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	and	8. Price of	9. Nu
Der	rivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ionNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Sec	urity	or Exercise		any	Code	of	(Month/Day/	/Year)	Underly	ying	Security	Secui
(Ins	str. 3)	Price of		(Month/Day/Year)	(Instr. 8	Derivativ	e		Securiti	ies	(Instr. 5)	Bene
		Derivative				Securities	S		(Instr. 3	3 and 4)		Own
		Security				Acquired						Follo
						(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						
						4, and 5)						
										Amount		
						Date Exercisable	Expiration Date	Of Title Num				
					Code V	/ (A) (D)						
					Code V	4, and 5)	Exercisable	•	Title N	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		

PRIOR MICHAEL T
C/O ATLANTIC TELE-NETWORK, INC.
600 CUMMINGS CENTER
BEVERLY, MA 01915

President and CEO

Signatures

/s/ Andrew S. Fienberg as attorney-in-fact for Michael T. Prior 03/30/2015

**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).
- (1) Represents shares withheld by the Company for payment of Mr. Prior's tax obligations arising from the vesting of shares of previously granted restricted stock.

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.

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