Mabey Mary Form 3

March 29, 2018	TES SECURITIES AN	ID EXCHA	NGE COM	MISSION	OMB A	PPROVAL	
FORM 3 UNITED STA	STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549			OMB Number:	3235-0104		
INITIAL S	TATEMENT OF BEN SECURI		OWNERSH	IP OF	Expires:	January 31 2005	
Section 17(a) of	to Section 16(a) of the the Public Utility Holdin 0(h) of the Investment C	Securities E ng Company	y Act of 193		Estimated a burden hou response	irs per	
(Print or Type Responses)							
1. Name and Address of Reporting Person <u>*</u> Mabey Mary	2. Date of Event RequiringStatement(Month/Day/Year)		ne and Ticker of national, Inc		nbol		
(Last) (First) (Middle)	03/21/2018		Relationship of Reporting erson(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O ATN INTERNATIONAL, INC., 500 CUMMINGS CENTER		(Check	all applicable)		` `	,	
(Street)				ow) Filing	lividual or Join (Check Applica orm filed by On	uble Line)	
BEVERLY, MA 01915				Persor Fo			
(City) (State) (Zip)	Table I - N	on-Deriva	tive Securiti	es Benefici	ally Owned	d	
1.Title of Security (Instr. 4)		Beneficially Owned Ownership Ownership		Indirect Bene	ficial		
Common Stock	7,279		D	Â			
Reminder: Report on a separate line for ea owned directly or indirectly.	ch class of securities benefici	ally S	SEC 1473 (7-02)			
information conta required to respo	pond to the collection of ained in this form are not and unless the form displa MB control number.						
Table II - Derivative Security	rities Beneficially Owned (e.	g., puts, calls	, warrants, opt	ions, convert	ible securitie	s)	

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Mabey Mary C/O ATN INTERNATIONAL, INC. 500 CUMMINGS CENTER BEVERLY, MA 01915	Â	Â	SVP and General Counsel	Â	
Signatures					

Signatures

/s/ Mary Mabey

<u>**</u>Signature of Reporting Person Date

03/29/2018

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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Remarks:

Exhibit 24 - Power of Attorney

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.