FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* McKay Edward H | | | | | | 2. Issuer Name and Ticker or Trading Symbol SHENANDOAH | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|---|--|--|---------|---|---|---|--------|---------------|--|------|-------------------|------------------------------|---|--|---|---|---|--------|--|---------------------------------------|--|
| | | | | | | TELECOMMUNICATIONS CO/VA/ | | | | | | | | | | Director Officer (give title | | | | 10% O\ Other (s | | |
| (Last) | Last) (First) (Middle) PO BOX 459 | | | | SHEN] | | | | | | | | | | X | below) | | | below) | Бреспу | | |
| | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/18/2017 | | | | | | | | | | | SR VP- Eng & Network Planning | | | | | | |
| (Street) | eet) DINBURG VA 22824 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | · | |
| LDIIVDO | JRG VI | | | | | | | | | | | | | | | X | | • | | orting Perso | | |
| (City) | (S | State) (Zip) | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Nor | n-Deriv | ative | Se | curit | ies Ac | quir | ed, C | Disp | osed o | of, oı | Ben | eficia | ally | Owned | ı | | | | |
| Date | | | | | ransaction e nth/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | t, Tr | 3. Transaction Code (Instr. 8) | | | | | 4 and Securitie Benefici Owned I | | es ally Following | Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | C | ode | v | Amount | | (A) or (D) | Price | • | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | |
| Common Stock 02/1 | | | | | 3/201 | 7 | | | | A | | 1,56 | 7 | Α | \$ | 0 | 23, | 097 | D | | | |
| Common Stock 02/18 | | | | | 8/2017 | | | | | F | | 599 | | D | \$2 | 29 22, | | 498 | | D | | |
| Common Stock 02/19/ | | | | | 9/201 | 7 | | | | A | | 1,59 | 7 | Α | \$ | 0 | 24, | ,095 | | D | | |
| Common Stock 02/19/ | | | | | | 7 | | | | F | | 514 | . | D | \$29 | | 23,581 | | | D | | |
| | | Т | able II - | | | | | | | | | sed of onverti | | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | i. Fransaction Code (Instr. 3) | | of E | | Expira | i. Date Exercisal Expiration Date Month/Day/Year | | | Amo Secu Unde Deriv | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e (| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | | xpiration ate | Title | 1 | Amoun or Numbe of Shares | r | | | | | | |
| Restricted Stock Units | (1) | 02/18/2017 | | | M | | | 1,567 | (| (2) | 02 | 2/18/2017 | Com Sto | | 1,567 | | \$0 | 30,603 | 3 | D | | |
| Restricted Stock | (1) | 02/19/2017 | | | м | | | 1.597 | (| (2) | 02 | 2/19/2018 | Com | mon | 1.597 | , | \$0 | 29.006 | , | D | | |

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of commons stock.
- 2. The option vests? on each the first, second, third and fourth anniversary. The options (and shares issuable upon exercise of the option) are subject to cancellation and forfeiture in accordance with the Company's executive compensation recovery policy.

Edward H McKay

02/22/2017

** Signature of Reporting Person

Date

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

- * 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.

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 Number.