FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
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

1. Name and Address of Reporting Person*  FERGUSON DAVID E							2. Issuer Name and Ticker or Trading Symbol SHENANDOAH TELECOMMUNICATIONS CO/VA/									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title V Other (specify					
(Last) (First) (Middle)					SHEN ]									below)  VP-Customer Services							
PO BOX 4	PO BOX 459					3. Date of Earliest Transaction (Month/Day/Year) 11/14/2007									VP	-Custon	ner S	ervices			
(Street) EDINBURG VA 22824				4. If a	Ame	ndmen	t, Date o	of Origina	l Filed	l (Month/Day	//Year)	6. Lir	ie)		·		(Check App				
					.									X Form filed by One Reporting Person  Form filed by More than One Reporting							
(City)	(Sta	te) (2	Zip)												son	a by Mon	c triari	One repor			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ır) E	2A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed Code (Instr.		es Acquired Of (D) (Instr		5) Secur Bene Owne	5. Amount of Securities Beneficially Owned Following Reported		6. Owners Form: Dir (D) or Ind (I) (Instr. 4		7. Nature of ndirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) or (D)	Price		actio	ion(s)			(111501.4)		
Common Stock 11/1-					/2007			М		3,048	A	\$5.99	16	24,708			D				
		Т	able II -								osed of, convertib			/ Owned	t			,	· ·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	ate, Transact Code (In:				6. Date Exercisa Expiration Date (Month/Day/Yea		е	7. Title an Amount of Securities Underlyin Derivative (Instr. 3 and	of S Ig Security	8. Price Derivati Security (Instr. 5	ve y )	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amoun or Numbe of Shares	r							
Incentive Stock Option	\$5.9916	11/14/2007			х			3,048	02/10/20	004 <sup>(1)</sup>	02/11/2008	Common Stock	3,048	\$5.991	.6	6,924		D			
Performance Shares	(2)						П		(3)		09/17/2015	Common	1,707			1,707	,	D			

## **Explanation of Responses:**

- 1. The option vests in two equal installments beginning 2-10-04.
- 2. 1-for-1
- 3. Vesting is subject to market and time-based conditions, both of which must be met for vesting to occur. The time-based condition requires that a receipient must remain in the continuous employment of the Company or one of its Affiliates until the date upon which the Performance Shares vest. All of the shares will fully vest on September 17, 2012, 2013, 2014 or 2015 if the average closing price of the common stock of the 30-day period ending on the day prior to such date is greater than or equal to \$28.70, \$30.34, \$31.98, and \$33.62 respectively. If the Performance Shares do not vest on or prior to September 17, 2015 they will be forfeited.

<u>/s/ David E. Ferguson</u> <u>11/14/2007</u>

\*\* Signature of Reporting Person Date

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

- \* 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.