SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 [*] DiMola James F			Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 04/30/2024 3. Issuer Name and Ticker or Trading Symbol SHENANDOAH TELECOMMUNICATIONS SHEN]						
(Last) 767 FIFTH 14TH FLOO (Street) NEW YORK (City)		(Middle) 10153 (Zip)			4. Relationship of Reporting Issuer (Check all applicable) X Director Officer (give title below)	10% C)wner (specify	File 6. li	d (Month/Day/ ndividual or Jo eck Applicable Form filed Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned										
····· · · · · · · · · · · · · · · · ·				2. Amount of Securities Beneficially Owned (Instr. I)	Form: [(D) or li	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Securit (Instr. 4)				5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr.
		[Amount or Number	Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	5)

Explanation of Responses:

No securities are beneficially owned.

/s/ James DiMola

05/10/2024 Date

** Signature of Reporting Person

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 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).

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.