SEC For	m 4																			
FORM 4 UNITED STA					TES	TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549											OMB APPROVAL			
Check this box if no longer subject to STATEME						IT OF CHANGES IN BENEFICIAL OWNERSHIP										Numbe ated av	er: verage burde	3235-0287 n		
obligations may continue. See									a) of the Se Investmen			hours	s per res	sponse:	0.5					
1. Name and Address of Reporting Person* LESLIE DARA					SF	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>SHENANDOAH</u>								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) PO BOX 459						TELECOMMUNICATIONS CO/VA/ [ SHEN ]									r (give title )	ive title Other below		specify		
						3. Date of Earliest Transaction (Month/Day/Year) 02/13/2024								VP Sales & Marketing						
(Street) EDINBU	Street) EDINBURG VA 22824					4. If Amendment, Date of Original Filed (Month/Day/Year) 02/15/2024								ne)		int/Group Filing (Check Applic				
(City)	City) (State) (Zip)													Form filed by More than One Reporting Person						
						ule	10b5-	-1(c	) Trans	act	ion Inc	licatio	n							
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tab	le I - Nor	n-Deriv	ative	e Se	curitie	s Ao	cquired,	Dis	posed o	of, or B	eneficia	Ily Owne	d					
Dat				2. Trans Date (Month/		- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Di Code (Instr. 5)		ecurities Acquired (A) posed Of (D) (Instr. 3, 4		Benefic Owned	es ially Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Security (Instr. 3)	tive Conversion Date Execution D ty or Exercise (Month/Day/Year) if any			Date, Transactio Code (Inst				itive ities red sed 3, 4	Expiration	. Date Exercisable and xpiration Date Month/Day/Year)			nd of ss ng re Security and 4)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares							

## Explanation of Responses:

(1)

1. Each restricted stock unit represents a contingent right to receive one share of common stock.

02/13/2024

2. The restricted stock unit award vests one-fourth on each the first, second, third and fourth anniversary. The restricted stock unit award (and shares issuable upon exercise of the restricted stock unit award) are subject to cancellation and forfeiture in accordance with the Company's executive compensation policy.

7,760

(2)

## Remarks:

Restricted

Stock Unit

This Form 4/A filing amends the Form 4 filing dated February 13, 2024 to correct the number of shares acquired in Column 5 from 8,245 to 7,760, correct the amount of underlying securities in Column 7 from 8,245 to 7,760, and to correct the number of derivative securities beneficially owned following the reported transaction in Column 9 from 18,758 to 18,273.

<u>Christopher E French Attorney</u> <u>in Fact for Dara Leslie</u> 02/19/2024

\$<mark>0</mark>

18,273

D

\*\* Signature of Reporting Person Date

7,760

Commor

Stock

02/17/2028

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

 $^{\star}$  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).

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.