SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287					
Estimated average burden						
hours per response:	0.5					

											P		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BEN Filed pursuant to Section 16(a) of the Securitie											OMB Numbe Estimated av hours per res	erage burden	
instruction 1(b)	•		Filed p	or Section 30(h) of	the Inve	estme	nt Company	Act of 19	940	Ŧ			
1. Name and Address of Reporting Person [*] FRENCH CHRISTOPHER E				2. Issuer Name an SHENANDO TELECOM	DAH		• •	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	SHEN]	<u>/10111</u>			X Officer (gi below)	Other (specify below)							
PO BOX 459	3. Date of Earliest 04/18/2023	Transac	tion (N	Month/Day/Ye	President & CEO								
(Street) EDINBURG VA 22824				4. If Amendment, I	Date of C	Drigina	al Filed (Mont	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip	,	Rule 10b5-	1(c) T	ran	saction	Indica	ation	1 0.0011			
				Rule 10b5-1(c) Transaction Indication 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.									
		Table I	- Non-Derivat	ive Securities	Acqu	ired,	Dispose	d of, o	r Bene	ficially Owned			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock			04/18/2023		w		333	A	\$ <mark>0</mark>	64,629	Ι	By Spouse	
Common Stock										289,001	D		
Common Stock										37,796	Ι	By Son	
Common Stock										134,806	Ι	TTEE WBF fbo Cynthia ⁽¹⁾	
Common Stock										160,706	I	TTEE French Grandchildren Trust ⁽¹⁾	
Common Stock										217,004	I	TTEE U/A WBF fbo Grandchildren ⁽¹⁾	
Common Stock										345,000	I	By Son as TTEE of French Family Trust ⁽¹⁾	
Common Stock										339,966	Ι	TTEE WBF fbo Anne ⁽¹⁾	
Common Staals										220.000		TTEE WBF fbo	

Common Stock

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

1. These shares are held in trust for the benefit of certain relatives of Mr. French. Mr. French disclaims beneficial ownership of the shares as to which he has no pecuniary interest and this filing is not an admission that Mr. French is the beneficial owner of such shares.

<u>Christopher E French</u>	<u>04/19/2023</u>
** Signature of Reporting Person	Date

339,966

I

Christopher⁽¹⁾

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.