FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFICIA | L OWNERSHIP |
|-----------|------------|----------------|-------------|

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden

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hours per response:

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* FLYNN MICHAEL T | | | | | <u>AT</u> | 2. Issuer Name and Ticker or Trading Symbol ATLANTIC TELE NETWORK INC /DE [ATNI] | | | | | | | | | | all app Dired | | | wner | |
|--|---|--|---|---------|---|--|---------|---|---|--|---------|----------------------------|------------------------|---------------------------|-------------|--|---|--|---|--|
| (Last) (First) (Middle) C/O ATLANTIC TELE-NETWORK, INC. 600 CUMMINGS CENTER | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/12/2012 | | | | | | | | | | belov | er (give title w) | | below) | (specify | |
| (Street) BEVERI (City) | Y M. | A (|)1915 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indivine) | rvidual or Joint/Group Filing (C Form filed by One Reportin Form filed by More than Or Person | | | ng Person | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | quired, | Disp | oosed o | f, or | Bene | eficia | ally | Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date | | n Date, | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | (A) oı 3, 4 a | 4 and Secu Bene | | cially I 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 | • | Transaction(s) (Instr. 3 and 4) | | | | (11341.4) |
| Common Stock 06 | | | | 06/12 | 6/12/2012 | | | | A | | 1,892 | 2 | Α | \$0 ⁽¹⁾ | | 4,376 | | D |) | |
| 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) | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transa Code (8) | | | ative rities ired osed . 3, 4 | 6. Date Expiration (Month/Date Exercisal) | n Date | • | Amo Secu Und Deri | Amo or Nun of | ount nber | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owr Fori Dire or Ir (I) (I | nership n: ct (D) ndirect nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Represents fully vested shares of restricted stock granted pursuant to the Issuer's 2008 Equity Incentive Plan in payment of Mr. Flynn's 2012 annual director retainer based on the closing per share price of \$34.35 of the Issuer's common stock on June 12, 2012.

/s/ Andrew S. Fienberg, as

Attorney-in-Fact for Michael 06/13/2012

T. Flynn

** 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.