FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES II	N BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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* Kreisher William F (Last) (First) (Middle) C/O ATLANTIC TELE-NETWORK, INC. 600 CUMMINGS CENTER (Street) BEVERLY MA 01915				3. D 03/	2. Issuer Name and Ticker or Trading Symbol ATLANTIC TELE NETWORK INC /DE [ATNI] 3. Date of Earliest Transaction (Month/Day/Year) 03/20/2015 4. If Amendment, Date of Original Filed (Month/Day/Year)								6	Relationship of Reporting Per Check all applicable) Director X Officer (give title below) Senior VP, Corpo Individual or Joint/Group Filin ine) X Form filed by One Rep Form filed by More that Person			10% Other belo Corporate De Filing (Checker Reporting Pe	Owner r (specify v) V Applicable	
(City)	(St		Zip)			_	••							<u></u> _					
		Tabl	e I - Nor	n-Deriva	ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	eficia	ally O	wne	d		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquir Disposed Of (D) (Instr. 5)				nd S	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A (I	A) or D)	Price	Trans		ction(s) 3 and 4)		(3 4)		
Common Stock 03/20/2				/2015	2015		F		525(1)		D	\$69	69.32		0,850	D			
Common Stock 03/22/			/ <mark>20</mark> 15	2015		F		189(1)		D	\$69	69.32		0,661	D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Security Instr. 3) 2. Conversion or Exercise Price of Derivative Security Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		Date,		Transaction of Code (Instr. De Se Ac (A) Dis of (In		of Ex		5. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	8. Pric Deriva Securi (Instr.	ivative urity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Sha						

Explanation of Responses:

1. Represents shares withheld by the Company for payment of Mr. Kreisher's tax obligations arising from the vesting of shares of previously granted restricted stock.

/s/ William F. Kreisher 03/23/2015

** 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 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.