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Form 4									
December 05, 201	.3								
FORM 4	UNITED	CT A TEC	SECU	DITIES				- NT	PPROVAL
	UNITED	SIAIES		shington			COMMISSIO	N OMB Number:	3235-0287
Check this box if no longer								Expires:	January 31, 2005
subject to Section 16. Form 4 or Form 5	IENT OF		SECUI	Estimated burden hou response	average urs per				
obligations may continue. <i>See</i> Instruction 1(b).		a) of the I	Public U	tility Hol	ding Cor		of 1935 or Section		
(Print or Type Respon	ises)								
1. Name and Address of Reporting Person <u>*</u> MATTHEWS JAMES E			2. Issuer Name and Ticker or Trading Symbol ADTRAN INC [ADTN]				5. Relationship of Reporting Person(s) to Issuer		
(Last) (I	First) (1	Middle)		of Earliest T			(Ch	eck all applicabl	e)
901 EXPLORER BLVD.			(Month/Day/Year) 08/08/2013			X Director 10% Owner X Officer (give title Other (specify below) Sr VP - Finance, CFO			
(S HUNTSVILLE, 2	4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
		(77)					Person		
(City) (S	State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
	nsaction Date h/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4)	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder: Report on	a separate line	for each cla	ass of sec	urities bene	Perso inforn requir	ns who rest nation cont ed to respo sys a current	or indirectly. Spond to the colle alined in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A or Disposed (D) (Instr. 3, 4, and 5)					(Inst
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	08/08/2013		А	25.357	(2)	(2)	Common Stock	25.357	
Phantom Stock	<u>(1)</u>	11/07/2013		А	28.708	(2)	(2)	Common Stock	28.708	
Phantom Stock	<u>(1)</u>	11/07/2013		А	2,066	(2)	(2)	Common Stock	2,066	

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
MATTHEWS JAMES E 901 EXPLORER BLVD. HUNTSVILLE, AL 35806	Х		Sr VP - Finance, CFO				
Signatures							
Gayle S. Ellis by Power of Attorney		12/05/2013					
**Signature of Reporting Person		Date					

Explanation of Responses:

- * 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).
- (1) Each share of phantom stock represents a right to receive one share of common stock or the cash value thereof.
- (2) The phantom stock becomes payable 6 months after the reporting person's separation of service with the Company. The reporting person may transfer his phantom stock account into an alternative investment at any time.

Upon vesting of performance shares awarded pursuant to a grant of November 6, 2010 under the ADTRAN, Inc. 2006 Employee Stock(3) Incentive Plan, the reporting person deferred the receipt of shares of the Company's common stock and received instead shares of phantom stock pursuant to the Company's deferred compensation plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.