Edgar Filing: REEVE PAMELA D A - Form 4

REEVE PAMELA	A D A										
Form 4											
April 02, 2019											
FORM 4	UNITED	STATES	SECU	RITIES A	AND EX	CHANGE	COMMISSIO	ΛT	PPROVAL		
	UIIIID	0111110		shington	Number:	3235-0287					
Check this box			U	Expires:	January 31,						
if no longer subject to	STATEN	AENT OF	F CHAN			Expires: 2005 Estimated average					
Section 16. SECURITIES								burden hou	urs per		
Form 4 or Form 5	Filed pu	count to S	action	16(a) of the	o Socurit	ios Excho	nge Act of 1934,	response	. 0.5		
obligations	·						of 1935 or Secti				
may continue. See Instruction						y Act of 1		on			
1(b).		()			· · · · ·	,					
(Print or Type Respon	ses)										
1. Name and Address	of Reporting	Person [*]	2. Issue	er Name an o	d Ticker or	Trading	5. Relationship of Reporting Person(s) to				
REEVE PAMELA D A			Symbol			0	Issuer				
		FRON	TIER CO	MMUNI	CATIONS	(Check all applicable)					
			CORP	[FTR]			(Check an applicable)				
(Last) (First) (Middle)				of Earliest T	ransaction		X_ Director 10% Owner Officer (give title Other (specify				
			(Month/Day/Year) 04/01/2019				below) below)				
401 MERRITT 7 (Street)											
				endment, D	-	1	6. Individual or Joint/Group Filing(Check				
			Filed(Mc	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by	One Reporting P	erson		
NORWALK, CT	06851						Form filed by Person	More than One R	eporting		
(City) (S	State)	(Zip)				a					
							cquired, Disposed		•		
	2. Transaction Date (Month/Day/Year)		ed Date, if	3. 4. Securities TransactionAcquired (A) or			5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
(Instr. 3)	n/Duy/Tear)	any		Code	Disposed		Beneficially	(D) or Indirect	Beneficial Ownership		
	(Month/E		y/Year)	(Instr. 8)	(Instr. 3, 4	and 5)		(I) (Instr. 4)			
						<i></i>	Following Reported	(Instr. 4)	(Instr. 4)		
						(A) or	Transaction(s)				
				Code V	Amount	(D) Price	(Instr. 3 and 4)				
Reminder: Report on	a separate line	e for each cla	ass of sec	urities bene	ficially own	ned directly of	or indirectly.				
The point off	. separate mit	- or cuon on			-	-	pond to the colle	ction of	SEC 1474		
							ained in this form		(9-02)		
							ond unless the fo ntly valid OMB co				

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
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

number.

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	<u>(1)</u>	04/01/2019		A <u>(2)</u>		11,244.16		<u>(1)</u>	(1)	Common Stock	11,244.10
Phantom Stock Units	<u>(1)</u>	04/01/2019		A <u>(3)</u>		14,018.69		<u>(1)</u>	<u>(1)</u>	Common Stock	14,018.69

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
REEVE PAMELA D A 401 MERRITT 7 NORWALK, CT 06851	Х						
Signatures							

Signatu

/s/ Mark D. Nielsen, under Power of Attorney

> **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). **
- Phantom stock units convert one-for-one into shares of common stock or cash equivalent, at the election of the Reporting Person, upon (1)the Reporting Person's termination of service as a director of the Company.

04/02/2019

(2) Quarterly payment of portion of annual retainer for service as Chairman of the Board, paid in the form of phantom stock units.

(3) Quarterly payment of portion of annual retainer paid in the form of phantom stock units.

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.