ADTRAN INC Form 4 July 18, 2013

FORM 4

OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB**

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Stock

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading FREDRICKSON ROBERT A Issuer Symbol ADTRAN INC [ADTN] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner X_ Officer (give title Other (specify 901 EXPLORER BLVD. 07/16/2013 below) VP - Carrier Network Sales (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting HUNTSVILLE, AL 35806 (City) (State) (Zip)

		140	ic I - I (OII-L	ciivative	Secui	ines Acqu	ii cu, Disposcu oi	, or Denemeral	y Owned
1.Title of	2. Transaction Date		3.	4. Securi		*	5. Amount of	6.	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			Securities Beneficially	Ownership Form: Direct	Indirect Beneficial	
(IIIsti. 3)		any (Month/Day/Year)	(Instr. 8)	(msu. 3,	4 and	3)	Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)
					(A)		Reported	(Instr. 4)	
					or		Transaction(s) (Instr. 3 and 4)		
			Code V	Amount	(D)	Price	(IIISu. 5 and 4)		
Common Stock	07/16/2013		M	3,750	A	\$ 15.29	3,750	D	
Common	07/16/2013		S	3,750	D	\$ 25.349	0	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

(1)

3235-0287

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average

burden hours per

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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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Incentive Stock Option (Right to Buy)	\$ 15.29	07/16/2013		M	3,750	11/06/2009(2)	11/06/2018	Common Stock	3,750

Reporting Owners

Reporting Owner Name / Address	Relationships
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Director 10% Owner Officer Other

FREDRICKSON ROBERT A 901 EXPLORER BLVD. HUNTSVILLE, AL 35806

VP - Carrier Network Sales

Signatures

Gayle S. Ellis by Power of Attorney

07/18/2013

**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).
- The shares were sold in multiple transactions at prices ranging from \$25.32 to \$25.39. This amount represents the weighted average sale (1) price of such transactions. The reporting person undertakes to provide full information regarding the number of shares sold at each separate price upon request by the Securities and Exchange Commission, the Issuer, or a security holder of the issuer.
- (2) The option vests in four equal and annual installments beginning on the first anniversary date of the grant as shown in column 6.

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.

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