### Edgar Filing: Ascent Capital Group, Inc. - Form 4

Ascent Cap Form 4	ital Group, Inc.												
October 02,	2014												
FORM 4 UNITED STATES SECURITIES AND EXCHA								т	OMB APPROVAL				
		RITIES . shingtor	N OMB Number:	3235	-0287								
Check the if no lor subject Section Form 4 Form 5	nger to <b>STATH</b> 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									Expires:January 31 2009Estimated average burden hours per response0.9		
obligatio may cor <i>See</i> Inst 1(b).	ons Section 1 nuction	7(a) of the	Public U	Itility Ho		mpar	iy Act o	f 1935 or Secti	on				
(Print or Type	Responses)												
FITZGERALD WILLIAM R Syn					nd Ticker o		ling	5. Relationship of Reporting Person(s) to Issuer					
			Ascent [ASCM	-	Group, Ir	1C.		(Check all applicable)					
				of Earliest 7 Day/Year)	Fransactior	1		_X_Director _X_10% Owner _X_Officer (give titleOther (specify					
	CAPITAL GRO DTC PARKW 00		10/01/2	2014				below) Chairm	below) an, President	& CEO			
	(Street)			endment, I onth/Day/Ye	Date Origin ar)	al		6. Individual or . Applicable Line) _X_ Form filed by	One Reporting	Person			
GREENW VILLLAG	OOD E, CO 80111							Form filed by Person	More than One	Reporting			
(City)	(State)	(Zip)	Tab	ole I - Non-	-Derivativ	e Secu	rities Ac	quired, Disposed	of, or Benefic	ially Owne	d		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transacti Code (Instr. 8)	4. Securi ior(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownershi (Instr. 4)	1			
Series A				Code V	Amount		Price \$	(Instr. 3 and 4)					
Common Stock	10/01/2014			F	870	D	60.63 (1)	104,014 <u>(1)</u>	D				
Series A Common Stock								11,109	I	By Will R. Fitzgera Irrevoca 2012 Tr	ıld ıble		
								23 210	T	2012 11	ast		

Series A	
Common	
Stock	

By grantor retained annuity trust (2)

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

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 control number.

# 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
FITZGERALD WILLIAM R ASCENT CAPITAL GROUP, INC. 5251 DTC PARKWAY, SUITE 1000 GREENWOOD VILLLAGE, CO 80111	Х	X	Chairman, President & CEO					
Signatures								
/s/ William E. Niles, attorney-in-fact	10/02/201	4						
**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) The shares disposed of in this transaction were withheld by the Issuer in connection with the payment of withholding taxes on certain restricted shares that vested on October 1, 2014. The price is based on an average of the high and low trading prices on October 1, 2014.

#### Edgar Filing: Ascent Capital Group, Inc. - Form 4

(2) The Reporting Person has sole voting power over the grantor retained annuity trust.

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.