FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, I	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI

OMB APPROVAL								
OMB Number: 3235-0287								
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

Name and Address of Reporting Person* Bullington Paul				2. Issuer Name and Ticker or Trading Symbol Uniti Group Inc. [UNIT]								ck all app Direc	tor		10% Ov	ner			
(Last)	(Fir	st) (M Γ DRIVE, SUIT	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/16/2024								X	belov	Officer (give title below) SVP-CFO &		Other (specify below) Treasurer		
(Street)	ROCK AF	2 7	2202		4. If Amendment, Dat				of Original Filed (Month/Day/Year)					6. Ind Line)	Form	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son			
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ided to				
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficial	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)			Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				Securi Benefi Owned	Securities Beneficially Dwned Following		Direct of Indirect of Itr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A)) or)	Price	Report Transa (Instr.	ection(s) 3 and 4)			Instr. 4)	
COMMON STOCK			05/16/2	/2024				A		385,802(1)	A	\$0 6		694,964		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security 1. Title of Conversion or Exercise Price of Derivative Security 1. Title of Conversion Date (Month/Day/Year) 2. Conversion Date (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 8) Se Ad (A Di of (Irstr. 4)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities ired r osed)	6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		D S (I	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)	Date Exercisable		Expiration Date	or Nu piration of		unt ber es					

Explanation of Responses:

1. Subject to the reporting person's continued employment, these shares will vest in three installments on the anniversary of the closing of the transactions (the "Closing") contemplated by the Agreement and Plan of Merger dated as of May 3, 2024, among the Issuer and Windstream Holdings II, LLC, with 20% of the award vesting on the first anniversary of the Closing, 30% of the award vesting on the second anniversary of the Closing and 50% of the award vesting on the third anniversary of the Closing.

/s/ PAUL BULLINGTON BY: DANIEL L. HEARD, 05/20/2024 **ATTORNEY-IN-FACT**

** Signature of Reporting Person Date

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.