

(Print or Type Responses)

1. Name and Address of Reporting

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB 3235-Number: 0104 Estimated average burden hours per 0.5 response...

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Person – O'HARE PATRICK J.		/Day/Year)	FTE Netwo	FTE Networks, Inc. [FTNW]				
3 WHIPPOORWILL XING	03/31/	2016		Person(s) to I	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
ARMONK, NY 10504			(Check all applicable) _X_ Director 10% Owner Officer (give Other (specify below)			wner Fil X	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Z	ip)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)		Ben		nt of Securities Ily Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Ownershi		rect Beneficial	
Series F Preferred Stock			2,500		D				
	no respond to d to respond	the colle unless th	ectior ie for	n of information m displays a cu	contained i	n this for I OMB co	ontrol	SEC 1473 (7-02)	
1. Title of Derivative Security (Instr. 4)		. Date Exercisable nd Expiration Date Month/Day/Year)		tle and Amount of rities Underlying vative Security :. 4)	Conversion or Exercise Price of		ship of (6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Numb of Shares	Derivative Security	Securit Direct or Indi (I) (Instr.	(D) rect		
Danarting Owner									

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
O'HARE PATRICK J. 3 WHIPPOORWILL XING ARMONK, NY 10504	X					

Signatures

/s/ Patrick O'Hare	04/14/2016
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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.