FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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| 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* DOLAN THOMAS CHARLES | | | | | | | | | | | | | Relationship leck all appli X Director | cable) | g Pers | 10% O\ | vner | |
|--|--|--|----------------|--|---|---|---|----------|---|-------|----------------|----------------------------|--|--|--|--|---|--|
| (Last) (First) (Middle) C/O DOLAN FAMILY OFFICE 340 CROSSWAYS PARK DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/11/2020 | | | | | | | | below) | | | below) | |
| (Street) WOODE | | | 11797 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date, | | | Code (In | Transaction Code (Instr. 8) Disposed Of (D) (Instr. 3 5) | | | str. 3, 4 an | Benefici Owned I Reporte | es Form ally (D) o Following (I) (Ir | | n: Direct or Indirect I nstr. 4) (| 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | Code | ٧ | Amount | (A) o | Price | Transac (Instr. 3 | | | | | | |
| | 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) | Execution | | 1. Fransaction Code (Instr. 3) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisa Expiration Date (Month/Day/Year | | Amount of | | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiali Owned Following Reported Transactio (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Ownership | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | piration te | Title | Amount or Number of Shares | | | | | |
| Restricted Stock Units | (1) | 06/11/2020 | | | A | | 4,195 | | (2) | | (2) | Class A Common Stock | 4,195 | (3) | 25,133 | 3 | D | |

Explanation of Responses:

- 1. Each restricted stock unit is granted under the AMC Networks Inc. 2011 Amended and Restated Stock Plan for Non-Employee Directors and represents a right to receive one share of Class A Common Stock
- 2. The restricted stock units are fully vested on the date of the grant and will be settled in cash or in stock on the first business day 90 days after service on the Board of Directors ceases.
- 3. Granted under the AMC Networks Inc. 2011 Amended and Restated Stock Plan for Non-Employee Directors for no consideration.

Remarks:

/s/ Thomas C. Dolan

06/15/2020

** 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.