FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPR	OVAL						
	OMB Number:	3235-0287						
	Estimated average burden							
1	hours nor resnance.	0.5						

Instruct	tion 1(b).			File	d pursuan	t to Section 16(a) of the	e Se	curitie	es Exchar	nae Act o	193	34						
						tion 30(h) of the									•				
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol AMC Networks Inc. [AMCX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
BELL WILLIAM J														X Directo	or		10% Ov	wner	
(Last) (First) (Middle) 11 PENN PLAZA				3. Date of Earliest Transaction (Month/Day/Year) 06/12/2019										Officer (give title below)		Other (specify below)			
				4 If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)							6 Ir	6. Individual or Joint/Group Filing (Check Applicable						
(Street)						T. II Americanent, Date of Original Filed (World) Day/ Teal)								Line)					
NEW YORK NY 10001 (City) (State) (Zip)														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
					.														
														. 3.3011					
		Tab	le I - Noi	n-Deriv	ative S	ecurities Ad	cquire	ed, I	Disp	osed o	of, or E	ene	eficial	ly Owned	t				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				action Day/Year)	Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (II					5. Amount of Securities Beneficially Owner following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									v	Amount	(A) (D)		Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
		1	able II -	Deriva	tive Sec	curities Acc	quirec	d, D	ispo	sed of	, or Be	nef	icially	Owned					
				(e.g., p	uts, cal	ls, warrants	s, opt	tion	s, c	onverti	ble se	curi	ities)						
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any			Date,	4. Transactio Code (Insti 8)	Expira	6. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned		10. Ownership Form: Direct (D) or Indirect	11. Nature of Indirec Beneficia Ownershi (Instr. 4)		

Explanation of Responses:

(1)

Restricted

Stock Units

Security

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 or the cash equivalent thereof.

Exercisable

(2)

Expiration

(2)

Date

Title

AMC Network

Inc. 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.

(A) or Disposed of (D)

(Instr. 3, 4 and 5)

(D)

(A)

2,477

3. Granted under the AMC Networks Inc. 2011 Amended and Restated Stock Plan for Non-Employee Directors for no consideration.

/s/ Anne G. Kelly, Attorney-in-06/14/2019 fact for William J. Bell

(3)

Following

Reported Transaction(s)

(Instr. 4)

20,938

(I) (Instr. 4)

D

** Signature of Reporting Person Date

Amount Number of Shares

2,477

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).

06/12/2019

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code ٧

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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.