(City)

(Last)

(State)

(First)

1. Name and Address of Reporting Person*

C/O DOLAN FAMILY OFFICE 340 CROSSWAYS PARK DRIVE

DOLAN HELEN A

(Zip)

(Middle)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

'	Nashington,	D.C.	2054

-t D O 00E40	
gton, D.C. 20549	OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

	ions may conti tion 1(b).	nue. See		Fi							ties Exchan		934			hour	s per res	sponse:	0.5		
					or	Secti	on 30((h) of the	Investme	nt Co	mpany Act										
	nd Address o	f Reporting Person [*] LES F							ker or Tra						ationship o k all applic Directo	able)	ng Pers X	()			
	LAN FAM	First)	(Middle)	3. Date				Date of Earliest Transaction (Month/Day/Year) 5/14/2015										below	'		
340 CRC	DSSWAYS	PARK DRIVE															г				
(Street)	Street) WOODBURY NY 11797		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting									
(City)	(5	State)	(Zip)											X	Person				9		
		Tak	ole I - No	n-Deri	vativ	e Se	curit	ies Ac	quired	, Dis	sposed o	f, or Be	nefic	ially	Owned						
1. Title of	Security (Ins	tr. 3)		2. Trans Date (Month/		ur) E	any	med on Date, Day/Year)	3. Transa Code (i			es Acquired Of (D) (Instr			5. Amount Securities Beneficial Owned Fo	ly	Form:	nership Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transactio (Instr. 3 an	n(s) id 4)			(Instr. 4)		
Class A (Common St	ock		05/14	1/2015				М		30,000	A	\$13	.55	30,0	00	D	(1)(2)			
Class A (Common St	ock		05/14	1/2015				М		15,000	A	\$13	13.55 45,		000 Г		(1)(2)			
Class A (Common St	ock		05/14	1/2015				F ⁽³⁾		27,143	D	\$75	.03	17,8	57	D	(1)(2)			
Class A (Common St	ock													52,243		I ⁽²⁾⁽⁴⁾		By CFD Revocable Trust		
			Table II -								osed of,				Owned						
1 Title of	2.	3. Transaction	3A. Deem		puts,	call	·				convertil	ble secu			3. Price of	9. Numb	or of	10	11 Natura		
L. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Iransaction Date (Month/Day/Year)	Execution if any (Month/Da	Date,	Transa Code (8)		n of Expira		n of r. Derivative Securities Acquired (A) or Disposed of (D) (Instr.		Expiration (Month/E	n Da	te	of Securit Underlyin Derivative (Instr. 3 ar	ies g Securi	[S. Price of Derivative Security (Instr. 5)	derivativ Securitie Benefici Owned Followin Reporter Transact (Instr. 4)	re es ally g d tion(s)	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amou or Numb of Share	er							
Options (Right to Buy)	\$13.55	05/14/2015			M			30,000	07/15/20)11	11/08/2015	Class A Common Stock	30,0	00	\$0.00	0		D ⁽¹⁾⁽²⁾			
Options (Right to Buy)	\$13.55	05/14/2015			M			15,000	07/15/20	011	11/08/2015	Class A Common Stock	15,0	00	\$0.00	0		D ⁽¹⁾⁽²⁾			
	nd Address o	f Reporting Person*																			
		(First) ILY OFFICE PARK DRIVE	(Mid	dle)		_															
(Street)	BURY	NY	117	97																	

(Street) WOODBURY	NY	11797
(City)	(State)	(Zip)

Explanation of Responses:

- 1. Securities held directly by Mr. Charles F. Dolan and indirectly by his spouse, Mrs. Helen A. Dolan.
- 2. Helen A. Dolan disclaims beneficial ownership of these securities and this report shall not be deemed to be an admission that she is, for the purposes of Section 16 or for any other purpose, the beneficial owner of such securities.
- $3. \ Shares \ withheld \ to \ pay \ withholding \ taxes \ on \ exercise \ and \ exercise \ price \ of \ options \ exempt \ under \ Rule \ 16b-3.$
- 4. Charles F. Dolan is the sole trustee and beneficiary of the Charles F. Dolan 2009 Revocable Trust.

Remarks:

/s/ Brian G. Sweeney, Attorneyin-fact for Charles F. Dolan
/s/ Brian G. Sweeney, Attorneyin-Fact for Helen A. Dolan

05/18/2015

** Signature of Reporting Person

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.