

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* <u>DOLAN CHARLES F</u> <hr/> (Last) (First) (Middle) C/O DOLAN FAMILY OFFICE 340 CROSSWAYS PARK DRIVE <hr/> (Street) WOODBURY NY 11797 <hr/> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>AMC Networks Inc. [AMCX]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <u>Member of 13(d) Group</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>06/16/2021</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year) <u>06/21/2021</u>		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				
Restricted Stock Units	(I)					(I)	(I)	N/A	(I)		0 ⁽¹⁾	D	

1. Name and Address of Reporting Person* <u>DOLAN CHARLES F</u> <hr/> (Last) (First) (Middle) C/O DOLAN FAMILY OFFICE 340 CROSSWAYS PARK DRIVE <hr/> (Street) WOODBURY NY 11797 <hr/> (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>DOLAN HELEN A</u> <hr/> (Last) (First) (Middle) C/O DOLAN FAMILY OFFICE 340 CROSSWAYS PARK DRIVE <hr/> (Street) WOODBURY NY 11797 <hr/> (City) (State) (Zip)

Explanation of Responses:

1. The reporting persons mistakenly filed a Form 4 reporting the grant of 2,493 restricted stock units under the AMC Networks Inc. 2011 Amended and Restated Stock Plan for Non-Employee Directors on June 16, 2021 that did not occur. As of June 16, 2021, the reporting persons did not beneficially own any restricted stock units under the AMC Networks Inc. 2011 Amended and Restated Stock Plan for Non-Employee Directors.

Remarks:

/s/ Dennis H. Javer, Attorney- 08/29/2022

[in-Fact for Charles F. Dolan](#)

[/s/ Dennis H. Javer, Attorney-](#) [08/29/2022](#)
[in-Fact for Helen A. Dolan](#)

** 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.