## Edgar Filing: AMC Networks Inc. - Form 4

AMC Netwo Form 4 June 11, 201											
FORM	ЛЛ							-	PPROVAL	-	
	STATES		RITIES A			E COMMISSIO	N OMB Number:	3235-0	287		
Check the if no lon subject to Section Form 4	nger <b>STATEN</b> 16.	x STATEMENT OF CHANGES IN BENEFICIAL O SECURITIES						Estimated burden hou	Expires: January 21 Estimated average burden hours per response		
Form 5 obligation may corn See Insta 1(b).	ons Section 17(	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> BELL WILLIAM J			2. Issuer Name <b>and</b> Ticker or Trading Symbol AMC Networks Inc. [AMCX]				5. Relationship of Reporting Person(s) to Issuer				
					_	ICAJ	(Check all applicable)				
(Last) (First) (Middle) 11 PENN PLAZA			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2015				X_ Director 10% Owner Officer (give title Other (specify below) below)				
				endment, Day/Yea	-	al	<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
NEW YOR	RK, NY 10001						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	(A)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D) Price	(Instr. 3 and 4)				
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities benef	ficially ow	ned directly	or indirectly.				
					inforı requi	nation cont red to resp	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pı
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Inst

number.

	Derivative Security				Di (D (In	) or spose ) str. 3, d 5)					
				Code	V (	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Restricted Stock Units	<u>(1)</u>	06/09/2015		A	1,	,743		<u>(2)</u>	(2)	AMC Networks Inc. Class A Common Stock	1,743
Report	ing Owi	ners									
Reporting Owner Name / Address		ldress Director	<b>Relationsh</b> 10% Owner	<b>ips</b> Officer O	ther						
BELL WIL 11 PENN P NEW YOR		X	10 % Owner	Uniter 0	ulei						
Signati	ures										
/s/ Anne G. J. Bell	Kelly, Attorr	ney-in-fact for W	Villiam	06/	'11/20	015					
**Signature of Reporting Person					Date						

## **Explanation of Responses:**

- \* 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).
- (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.
- (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.

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.