

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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>Antara Capital LP</u> _____ (Last) (First) (Middle) <u>55 HUDSON YARDS, 47TH FLOOR, SUITE C</u> _____ (Street) <u>NEW YORK NY 10001</u> _____ (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>AMC ENTERTAINMENT HOLDINGS, INC. [</u> <u>AMC, APE ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>06/20/2023</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		Rule 10b5-1(c) Transaction Indication <input type="checkbox"/> Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**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			
AMC Preferred Equity Units	06/20/2023		s		1,121,511	D	\$1.72	121,325,688	I	See Footnotes <sup>(1)</sup> (2)(3)(4)
AMC Preferred Equity Units	06/20/2023		s		1,000,000	D	\$1.73	120,325,688	I	See Footnotes <sup>(1)</sup> (2)(3)(4)
AMC Preferred Equity Units	06/21/2023		s		1,759,735	D	\$1.66	118,565,953	I	See Footnotes <sup>(1)</sup> (2)(3)(4)
AMC Preferred Equity Units	06/21/2023		s		75,000	D	\$1.85	118,490,953	I	See Footnotes <sup>(1)</sup> (2)(3)(4)
AMC Preferred Equity Units	06/21/2023		s		424,400	D	\$1.92	118,066,553	I	See Footnotes <sup>(1)</sup> (2)(3)(4)

**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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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					

1. Name and Address of Reporting Person* <u>Antara Capital LP</u> _____ (Last) (First) (Middle) <u>55 HUDSON YARDS, 47TH FLOOR, SUITE C</u> _____ (Street) <u>NEW YORK NY 10001</u> _____ (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Antara Capital Fund GP LLC</u> _____ (Last) (First) (Middle) <u>55 HUDSON YARDS, 47TH FLOOR, SUITE C</u> _____ (Street) <u>NEW YORK NY 10001</u> _____ (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Antara Capital Master Fund LP</u> _____ (Last) (First) (Middle)

55 HUDSON YARDS, 47TH FLOOR, SUITE C  

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(Street)  
NEW YORK NY 10001  

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(City) (State) (Zip)

1. Name and Address of Reporting Person\*  
[Antara Capital GP LLC](#)  

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(Last) (First) (Middle)  
55 HUDSON YARDS, 47TH FLOOR, SUITE C  

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(Street)  
NEW YORK NY 10001  

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(City) (State) (Zip)

1. Name and Address of Reporting Person\*  
[Gulati Himanshu](#)  

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(Last) (First) (Middle)  
55 HUDSON YARDS, 47TH FLOOR, SUITE C  

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(Street)  
NEW YORK NY 10001  

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(City) (State) (Zip)

**Explanation of Responses:**

1. This Form 4 is being filed on behalf of (i) Antara Capital Master Fund LP, a Cayman Islands exempted limited partnership ("Antara Master Fund"), (ii) Antara Capital LP, a Delaware limited partnership ("Antara Capital"), (iii) Antara Capital GP LLC, a Delaware limited liability company ("Antara GP"), (iv) Antara Capital Fund GP LLC, a Delaware limited liability company ("Antara Fund GP") and (v) Himanshu Gulati (collectively, the "Reporting Persons").
2. Antara Capital serves as the investment manager of Antara Master Fund. Antara Fund GP is the general partner of Antara Master Fund and Antara GP is the general partner of Antara Capital. Himanshu Gulati is the sole member of Antara Fund GP and Antara GP. Each of Antara Capital, Antara GP, Antara Fund GP and Himanshu Gulati may be deemed to indirectly beneficially own the securities held directly by Antara Master Fund and each disclaims beneficial ownership of all such securities except to the extent of any indirect pecuniary interest therein.
3. The securities are held directly by Antara Master Fund.
4. This report shall not be deemed an admission that the Reporting Persons or any other person is the beneficial owner of the securities reported herein for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

[Antara Capital Master Fund LP](#)  
[By: Antara Capital LP, not in its individual corporate capacity, but solely as Investment Advisor and agent By: Antara Capital GP LLC, its general partner By: /s/ Himanshu Gulati Name: Himanshu Gulati Title: Managing Member](#) [06/22/2023](#)  
[Antara Capital LP By: /s/ Himanshu Gulati Name: Himanshu Gulati Title: Managing Member](#) [06/22/2023](#)  
[Antara Capital GP LLC By: /s/ Himanshu Gulati Name: Himanshu Gulati Title: Managing Member](#) [06/22/2023](#)  
[Antara Capital Fund GP LLC By: /s/ Himanshu Gulati Name: Himanshu Gulati Title: Managing Member](#) [06/22/2023](#)  
[/s/ Himanshu Gulati Himanshu Gulati](#) [06/22/2023](#)

\*\* 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.**