## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)													
Name and Address of Reporting Person * Olsen Michael				2. Issuer Name and Ticker or Trading Symbol Altice USA, Inc. [ATUS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  10% Owner					
(Last) (First) (Middle) 1 COURT SQUARE WEST			3. Date of Earliest Transaction (Month/Day/Year) 02/17/2021						X_Office	er (give title bele EVP, (	ow) Gen. Counse	Other (specify black)  1 & Secy	elow)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
LONG IS	SLAND C	ITY, NY 11	101								Form the	ed by More man	One Reporting	reison	
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Owned						
(Instr. 3) Date			2A. Deemed Execution Date, if any	Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)	Beneficial Reported	of Securities by Owned Following Fransaction(s)		Ownership Form:	Beneficial		
				(Month/Day/Year		ode	v	Amoun	(A) or	Price	(Instr. 3 a	nd 4)			Ownership (Instr. 4)
Class A common stock 02/17		02/17/2021		5	S		5,000	D	\$ 34	72,038		D			
				Derivative Securit		t quire	conta the fo d, Dis	ined in orm dis	n this for splays a of, or Ben	m are curre	e not requently valid	OMB conf	formation spond unle trol numbe	ss	1474 (9-02)
1 75'41 6	l <sub>a</sub>	2 75 4		e.g., puts, calls, w								0 D : C	0.31 1	C 10	11. 27.
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Da Year) any	4. Transaction Code (Instr. 8)	Number a		6. Date Exercisable and Expiration Date (Month/Day/Year)		Am Und Sec	Title and ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (I or Indire	Beneficial Ownershi (Instr. 4)	
				Code V	(A)		Date Exerc		Expiration Date	n Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Olsen Michael 1 COURT SQUARE WEST LONG ISLAND CITY, NY 11101			EVP, Gen. Counsel & Secy					

### **Signatures**

/s/ Michael Olsen	02/19/2021
**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).

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.