FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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Nachington	D C 20540	

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		

- 1		
	OMB Number:	3235-0287
	Estimated average	burden
	hours per response	9. 0.5

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instruction	10.																
1. Name and Address of Reporting Person* <u>Guttman-McCabe Christopher</u>				2. Issuer Name and Ticker or Trading Symbol Anterix Inc. [ ATEX ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
												Direc			10% O			
4 0		-·	(A 4: 1 II )		_								1	Office	er (give title v)		Other ( below)	specify
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/15/2024							Chi	Chief Reg & Comm Of			r			
		NTAIN PLAZA			11/1	3/202	4								_			
SUITE 4	101																	
(Street)					4. If A	Amend	ment, Date	of Origin	al File	d (Month/Da	y/Year	)		vidual o	r Joint/Grou	p Filing	(Check A	pplicable
WOODL	AND												Line)	Form	filed by One	e Reno	rtina Pers	on
PARK	N	IJ	07424												filed by Mo		•	
(City)	(;	State)	(Zip)															
		Table	e I - No	n-Deriva	tive S	Secu	rities Ac	quired	, Dis	posed of	, or E	Benef	icially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Date,		Code	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)				Securi Benefi Owned	urities F eficially ( ned Following (		Direct	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) (D)	or P	rice		ted action(s) 3 and 4)			(Instr. 4)
Common	Stock			11/15/2	2024		F		3,447(1)	Г	\$	31.93 48,2		3,288 D		D		
		Та	ıble II -							osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ercise (Month/Day/Year) of ative		ecution Date, any		4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Dei Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y C F D o (I	0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Natur of Indired Beneficia Ownersh (Instr. 4)
					Code	v	(A) (D)	Date Exerci		Expiration Date	Title	Amou or Numb of Share	er					

## **Explanation of Responses:**

1. The shares were withheld by the Issuer to satisfy withholding obligations in connection with the partial vesting and settlement of restricted stock units.

## Remarks:

Ashe, Attorney-ins/ Gena L.

**Fact** 

\*\* Signature of Reporting Person Date

11/19/2024

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.