### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# Check this box if no longer subject to Section 16. Form 4 or Form 5

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     Falcone Sorrell Cristiana						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Viacom Inc. [ VIA, VIAB ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Talcone Joneth Chanana																Direct	or		10% Ov	vner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 12/04/2019										Office below	(give title		Other (s below)	specify	
1515 BROADWAY																					
-						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street)															Line)  X Form filed by One Reporting Person						
NEW YORK NY 10036																, ,					
																Form Perso		d by More than One Reporting			
(City)	(City) (State) (Zip)															. 0.00					
		Tab	le I - Noi	n-Deriv	/ative	Se	curiti	ies Ac	qui	ired, D	isp	osed o	of, or Bo	enefi	cially	Owne	t				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,			·,   [			Dispose	rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								(	Code	/	Amount	(A) (D)	or P	rice	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Class B Common Stock <sup>(1)</sup> 12/04/2						2019				D		26,69	)6 D		(1)	0			D		
		Т	able II -										, or Ber ble sec			Owned					
							<u> </u>				· · · · · · · · · · · · · · · · · · ·					<del></del>			10	44.31.1	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	SA. Deeme Execution if any (Month/Da	Date,	4. Transactic Code (Ins 8)		on of E			Date Exercisable and xpiration Date Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		[   9   (	. 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)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable		epiration ate	Title	Amo or Num of Shar	ber						
Restricted Share Units	(2)	12/04/2019			D			5,948		(2)		(2)	Class B Common	5,9	48	(2)	0		D		

## **Explanation of Responses:**

- 1. Converted pursuant to the merger agreement (the "Merger Agreement") between CBS Corporation ("CBS") and Viacom Inc. ("Viacom") into 0.59625 shares of CBS Common Stock for each share of Viacom Common Stock.
- 2. Represents restricted stock units ("RSUs") granted on January 31, 2019 under the Viacom Inc. 2011 RSU Plan for Outside Directors, as amended and restated as of January 1, 2016, and as further amended and restated as of October 31, 2016. Each RSU was converted into 0.59625 shares of CBS Common Stock pursuant to the terms of the Merger Agreement.

/s/ Christa A. D'Alimonte,

12/06/2019 Attorney-in-Fact for Cristiana

Falcone Sorrell

\*\* 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.