DEDHAM

(City)

MA

(State)

02026

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

> > 7. Nature of Indirect Beneficial Ownership (Instr. 4)

Spouse

11. Nature of Indirect Beneficial Ownership (Instr. 4)

NAIRI, Inc.(3)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	r Secti	on 30(l	h) of t	he Inve	stmer	nt Co	ompany Act o	of 1940								
1		Reporting Person* MNER M							Ticker o			Symbol						p of Reportin plicable) ctor		rson(s) to Is	
(Last) 1515 BR	(Fi	rst) ((Middle)			Date (2/28/2		est Tr	ransacti	on (M	lonth	n/Day/Year)				X		er (give title		Other below)	(specify
(Street) NEW Y(10036		4.	If Ame	endmer	nt, Da	ate of O	riginal	l File	ed (Month/Da	ay/Year))		Indiv ne)	Forn	or Joint/Group on filed by One on filed by Mor on	e Rep	oorting Pers	son
(City)	(5)		(Zip)		<u> </u>																
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				n 'ear)	2A. Deeme		ate,	3. Transaction Code (Instr. 8)		4. Securities Acqui		quired	quired (A) or Dispo			5. Am Secu Bene Owne	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indired Beneficia Ownersh	
									Code	v	An	nount	(A) or (D)	Pri	rice		Repo Trans (Instr	rted saction(s) . 3 and 4)			(Instr. 4)
Class B o	common sto	ck	12	/28/200)5				D		1,	163,486 ⁽¹⁾	D	\$3	34.481	L9 ⁽²⁾	79	,619,055		I	By NAIRI Inc. ⁽³⁾
Class B c	common sto	ck															4	63,520		D	
Class B o	common sto	ck																265		I	By 401(k)
Class B c	common sto	ck																200		Ι	By Spouse
		Ta										osed of, convertib				y Ov	vned				
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)				er 6. Date E Expiratio (Month/D		xercisable and n Date		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 (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Ownership Form:	Benefici Ownersh (Instr. 4)
					Code	e V	(A)	(D)	Dai	te ercisal	ble	Expiration Date	Title	or Nur of	nount mber ares						
ı		Reporting Person*																			
(Last) 1515 BR	ROADWAY	(First)	(Midd	dle)																	
(Street)	ORK	NY	1003	36																	
(City)		(State)	(Zip)																		
1. Name ai		Reporting Person*																			
(Last) 200 ELN	и STREET	(First)	(Midd	dle)																	
(Street)						-															

1. Name and Address of Reporting Person* NATIONAL AMUSEMENTS INC /MD/							
(Last) 200 ELM STRE	(First)	(Middle)					
(Street) DEDHAM	MA	02026					
(City)	(State)	(Zip)					

Explanation of Responses:

- 1. Shares sold to Viacom Inc. (Viacom) pursuant to a previously disclosed agreement among NAIRI, Inc. (NAIRI), National Amusements Inc. (NAI) and Viacom, pursuant to which NAIRI and NAI participate in Viacom's stock purchase program on a pro-rata basis.
- 2. Calculated in accordance with the terms of the agreement referred to in footnote 1.
- 3. These securities are owned directly by NAIRI, but may also be deemed to be beneficially owned by (1) NAIRI's parent corporation, NAI, and (2) Sumner M. Redstone, who is the controlling stockholder of NAI.

Remarks:

By: /s/ Michael D. Fricklas, 12/29/2005 Attorney-in-Fact

By: /s/ Richard J. Sherman, 12/29/2005 Vice President

By: /s/ Richard J. Sherman, 12/29/2005 Vice President

** 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.