FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL												
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hours per response:	0.5											

401(k)

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

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 Addr	ess of Reporting	Person*		uer Name <b>and</b> Ticke			Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Lea DeDe</u>			1	tom me.	., 1111	<b>J</b>			Director					
		(Middle)	3 Dat	e of Farliest Transa	ction (M	/onth/l	Day/Vear)	<b>X</b>	Officer (give title below)		Other (specify below)			
(Last)	(First)		3. Date of Earliest Transaction (Month/Day/Year) 06/16/2015						EVP, Government Relations					
1515 BROADY	WAY													
(Street)		4. If A	mendment, Date of	Origina	l Filed	(Month/Day/Y	6. Indi	6. Individual or Joint/Group Filing (Check Applicable Line)						
NEW YORK	NY					Form filed by One Reporting Person								
										Form filed by Mo Person	re than One Rep	oorting		
(City)	City) (State) (Zip)													
		Table I - Nor	n-Derivative S	Securities Acq	uired,	Dis	posed of,	or Ben	eficially	Owned				
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Class B Commo	on Stock	06/16/2015		М		3,500	A	\$22.7	29,830	D				
Class B Commo	on Stock	06/16/2015		М		4,000	A	\$32.55	33,830	D				
Class B Commo	on Stock	06/16/2015		М		6,000	Α	\$47.21	39,830	D				
Class B Commo	on Stock	06/16/2015		S		13,500	D	\$66.26	26,330	D				
Class B Common Stock										1,050	I	By 401(k)		

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transa Code ( 8)		n of		6. Date Exerc Expiration Di (Month/Day/\)	ate	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	Title	Amount or Number of Shares				
Employee Stock Option (Right to Buy) <sup>(1)</sup>	\$22.7	06/16/2015		M			3,500	(2)	06/03/2017	Class B Common Stock	3,500	(1)	1,081	D	
Employee Stock Option (Right to Buy) <sup>(1)</sup>	\$32.55	06/16/2015		M			4,000	(2)	06/08/2018	Class B Common Stock	4,000	(1)	2,220	D	
Employee Stock Option (Right to Buy) <sup>(3)</sup>	\$47.21	06/16/2015		M			6,000	(2)	05/23/2020	Class B Common Stock	6,000	(3)	13,168	D	

## **Explanation of Responses:**

- 1. Granted under the Viacom Inc. 2006 Long-Term Management Incentive Plan, as amended and restated as of December 2, 2008, for no consideration.
- 3. Granted under the Viacom Inc. 2006 Long-Term Management Incentive Plan, as amended and restated as of January 1, 2011, for no consideration.

#### Remarks:

/s/ Michael D. Fricklas Attorney-in-Fact for DeDe Lea

06/18/2018

\*\* 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.