SEC Form 4	
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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
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

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

						pen) : ::: =: ::						
1. Name and Address of Reporting Person [*] SALERNO FREDERIC V				er Name and Ticke <u>om Inc.</u> [VIA	0	ymbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SALERNU	FREDERI	<u>L V</u>			, 1		X	Director	10%	Owner		
(Last) 1515 BROADV	(First) NAY	(Middle)	3. Date 01/01	e of Earliest Transad /2015	ction (Month/E	Day/Year)		Officer (give title below)	Other below	(specify)		
			4. If An	nendment, Date of	Original Filed	(Month/Day/Year)		/idual or Joint/Grou	p Filing (Check /	Applicable		
(Street)							Line)					
NEW YORK	NY	10036						Form filed by On	e Reporting Per	son		
		10000						Form filed by Mo Person	re than One Rej	porting		
(City)	(State)	(Zip)										
		Table I - Nor	n-Derivative S	ecurities Acqu	uired, Disp	oosed of, or Benefi	cially	Owned				
1. Title of Security	/ (Instr. 3)		2. Transaction	2A. Deemed	3.	4. Securities Acquired (A)) or	5. Amount of	6. Ownership	7. Nature		

le of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if any	Code (Instr.					5. Amount of Securities Beneficially Owned Following	(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	 Reported Transaction(s) (Instr. 3 and 4) 		(1150.4)

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

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)		of Deriv	Expiration Date (Month/Day/Year) irites irited r osed) . 3, 4		Expiration Date (Month/Day/Year)		Expiration Date (Month/Day/Year)		Expiration Date Ar (Month/Day/Year) Se Ur De		Expiration Date (Month/Day/Year)		Expiration Date Amount of		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											
Restricted Share Units	(1)	01/01/2015		A		32		(1)	(1)	Class B Common Stock	32	(1)	1,028	D								

Explanation of Responses:

1. Represents cash dividends and interest credited during the previous quarter on director compensation previously deferred pursuant to the Viacom Inc. Deferred Compensation Plan for Outside Directors and on director compensation previously deferred pursuant to the former Viacom Inc. (now CBS Corporation) deferred compensation arrangement for directors. Pursuant to the Viacom Inc. Deferred Compensation Plan for Outside Directors, as amended and restated as of November 13, 2013, these amounts are invested quarterly in a number of vested Restricted Share Units ("RSUs") that such amounts would have purchased on the day the amounts are invested. The RSUs are paid out six (or more) months after the Director's retirement from the Board and are settled in shares of Class B Common Stock.

Remarks:

/s/ Frederic V. Salerno

** Signature of Reporting Person

01/05/2015

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.