NAIRI INC

200 ELM STREET

(Last)

(Street) **DEDHAM**

(City)

(First)

 $\mathbf{M}\mathbf{A}$

(State)

(Middle)

02026

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

oox if no longer subject to	STATEMENT

OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden

Check this box if Section 16. Form obligations may Instruction 1(b).	n 4 or Form 5	•	S		ed pur	suant	to Sec	ction 16	S(a) of th	ne Sed	Curities Exchan	ge Act o		RSH	IP	Estima	Number: ated average burd per response:	3235-0287 len 0.5	
1. Name and Addre		•			2.	Issue	r Nam	e and		r Trad	ing Symbol			5. Rela (Check X	tionship o all applic Director	able)	g Person(s) to I		
(Last) 1515 BROADW						3. Date of Earliest Transaction (Month/Day/Year) 11/07/2006									X Officer (give title Other (specify below) below) Chairman of the Board				
(Street) NEW YORK	NY	1	.0036	5	4.	If Am	endme	ent, Dat	e of Ori	ginal f	Filed (Month/Da	ay/Year)		6. Indiv Line)	Form fil	led by One led by Mor	o Filing (Check <i>F</i> e Reporting Pers re than One Rep	son	
(City)	(State)		Zip)																
1. Title of Security	(Instr. 3)	Tabl	e I -	2. Transaction Date (Month/Day/	on	2A. [Deeme	d	3. Transa Code (ction	4. Securities A Disposed Of (Acquired	(A) or		5. Amou Securitie Benefici	es	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect	
				(MOHHI/Day/	reary		y nth/Day	/Year)	8)	v v	Amount	(A) or (D)	Price			ollowing d tion(s)	(I) (Instr. 4)	direct Beneficial	
Class B Common	n Stock			11/07/20	06				D		312,191 ⁽¹⁾	D	\$38.5	5345 ⁽²⁾	33,51	12,815	I	By NAIRI, Inc. ⁽³⁾	
Class B Common	n Stock														288	,320	D		
Class B Common	n Stock														1	21	I	By 401(k)	
Class B Common	n Stock														1	00	I	By Spouse	
		Та	ble								sposed of, s, convertib				vned				
1. Title of Derivative Security (Instr. 3) Price of Derivat Securit	sion Date (Montl f ive	nsaction n/Day/Year)	Exec if any	Deemed ution Date, y th/Day/Year)		saction e (Instr	n of r. De Se Ac (A) Di: of (In	Numbe curities quired or sposed (D) str. 3, 4	Exp (Mo	iration	ercisable and Date yJYear)	7. Title Amoun Securit Underly Derivat Securit and 4)	it of ies ying	Deriv Secu (Inst	vative de sirity (7. 5) Be O Fe Re	Number of erivative ecurities eneficially wned ollowing eported ansaction (nstr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	e V	(A)) (D)	Date Exe	e rcisab	Expiration le Date	Title	Amoun or Numbe of Shares	r					
1. Name and Addre	•	•																	
(Last) 1515 BROADW	(First)		((Middle)															
(Street) NEW YORK	NY			10036															
(City)	(State)			(Zip)															
1. Name and Addre	ss of Reporti	ng Person*																	

1. Name and Address of Reporting Person* NATIONAL AMUSEMENTS INC /MD/							
(Last) 200 ELM STRE	(First) ET	(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, Inc. (NAIRI), but may also be deemed to be beneficially owned by (1) NAIRI's parent corporation, National Amusements, Inc. (NAI) and (2) Sumner M. Redstone, who is the controlling stockholder of NAI.

Remarks:

By: Michael D. Fricklas, 11/09/2006 Attorney-in-Fact

By: Richard J. Sherman, Vice 11/09/2006

President

By: Richard J. Sherman, Vice 11/09/2006 **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.